

**Support for Analysis and Research in Africa II
(SARA II)**

**Annual Report
Project Year 5 (FY 2004)**

**Submitted to
USAID, Bureau for Africa, Office of Sustainable Development**

February 2005

The SARA Project is operated by the Academy for Educational Development with subcontractors Tulane University, JHPIEGO, Morehouse School of Medicine, and Population Reference Bureau. SARA is funded by the U.S. Agency for International Development (AFR/SD/HRD) under Contract number AOT-C-00-99-00237-00.



Support for Analysis and Research in Africa

Annual Report Project Year 5 (FY 2004)

I.	Introduction	1
II.	Overview	3
III.	Activities Affecting All AFR/SD Health and Human Resources Strategic Objectives	11
	A. Collaboration with African Institutions and Networks	11
	B. Dissemination and Advocacy.....	17
IV.	Activities in AFR/SD–SARA Analytic Areas	31
	A. Child Survival (SO 19).....	31
	B. Infectious Diseases (SO 19)	
	<i>Malaria</i>	41
	<i>Tuberculosis</i>	45
	<i>Integrated Disease Surveillance and Response</i>	47
	C. Nutrition (SO 19).....	51
	D. Population/Reproductive Health/Maternal Health (SO 20)	69
	E. HIV/AIDS Prevention and Mitigation (SO 21)	77
	F. Crosscutting Issues.....	87
	G. Management	89
	Appendix A—Dissemination/Publications List	91
	Appendix B—List of Deliverables Over the Life of the Project	99
	Appendix C—Subcontractors’ Activities	117
	Appendix D—CTO Letter Tracking List	125

Acronyms and Abbreviations

AFR/SD	Bureau for Africa, Office of Sustainable Development
AIDS	acquired immunodeficiency syndrome
AJTMH	American Journal of Tropical Medicine and Hygiene
ARH	adolescent reproductive health
ARV	antiretroviral
BCC	behavior change communication
CA	cooperating agency
CAH	Child and Adolescent Health Division
CCM	country coordinating mechanism
CDC	Centers for Disease Control and Prevention
CEFOREP	Center for Training and Research in Reproductive Health
CERPOD	Regional Center for Research in Population and Development
CHBC	Community Home Based Care
COHRED	Council on Health Research for Development
CORE	Child Survival Collaborations and Resources Group
CRHCS	Commonwealth Regional Health Community Secretariat (now ECSA)
CTC	Community Therapeutic Care
DDC	Division of Communicable Disease Prevention and Control
DFID	Department for International Development, U.K.
DJCC	Directors Joint Consultative Committee
ECOWAS	Economic Community of West African States
ECSA	East, Central and Southern Africa Health Community Secretariat (formerly CRHCS)
EHP	Environmental Health Project
ENA	Essential Nutrition Actions

FANTA	Food and Nutrition Technical Assistance Project
FGC	female genital cutting
FHI	Family Health International
FP	family planning
GFATM	Global Fund to Fight AIDS, Tuberculosis and Malaria
GH	Bureau for Global Health
HACI	Hope for African Children's Initiative
HCP	Health Communications Partnership
HIPNET	Health Information and Publications Network
HIV	human immunodeficiency virus
HKI	Helen Keller International
HPN	health, population and nutrition
IDSR	integrated disease surveillance and response
IMCI	Integrated Management of Childhood Illness
ITN	insecticide-treated net
IVM	integrated vector management
JHU	Johns Hopkins University
LOE	level of effort
LSHTM	London School of Hygiene and Tropical Medicine
M&E	monitoring and evaluation
MAC	Malaria Action Coalition
MIP	malaria in pregnancy
MIPESA	Malaria in Pregnancy in Eastern and Southern Africa Coalition
MNH	maternal and newborn health
MOH	ministry of health
MPH	maternal and perinatal health

MPWG	Malaria in Pregnancy Working Group
MSH	Management Sciences for Health
MTCT	mother-to-child transmission of HIV
NAP+	Network of African People Living with HIV/AIDS
NGO	nongovernmental organization
NIAID	National Institute of Allergy and Infectious Diseases
NIH	National Institutes of Health
OGAC	Office of the Global AIDS Coordinator
OVC	orphans and vulnerable children
PAC	postabortion care
PATH	Program for Appropriate Technologies in Health
PHNI	Population, Health & Nutrition Information Project
PLWHA	people living with HIV/AIDS
PMTCT	prevention of mother-to-child transmission of HIV
PRB	Population Reference Bureau
RAOPAG	Malaria in Pregnancy Network for West Africa
RBM	Roll Back Malaria
RCQHC	Regional Centre for Quality of Health Care
REDSO	Regional Economic Development Services Office for East and Southern Africa
RH	reproductive health
RHAP	Regional HIV/AIDS Program
SARA	Support for Analysis and Research in Africa Project
SEAM	Strategies for Enhancing Access to Medicines Program
SFPS	Santé Familiale et Prévention du SIDA Project
SHSPH	School of Health Systems and Public Health, University of Pretoria
SOTA	state-of-the-art

SMNHP	Safe Motherhood and Newborn Health Partnership
TAG	Technical Advisory Group (on Nutrition and HIV/AIDS)
TB	tuberculosis
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNC	University of North Carolina
USAID	U.S. Agency for International Development
VPD	Vaccine Preventable Diseases
WAHO	West African Health Organization
WARN	West Africa Network
WARP	West Africa Regional Program
WFP	World Food Programme
WHO/AFRO	World Health Organization, Regional Office for Africa

I. Introduction

Support for Analysis and Research in Africa (SARA) II is pleased to submit this report for Project Year 5, which describes SARA's activities in support of the USAID, Bureau for Africa, Office of Sustainable Development (AFR/SD). The report is organized as follows:

- ◆ The Introduction (Section I) is followed by an Overview (Section II) that briefly sketches highlights from the year's activities and future directions.
- ◆ Section III deals with two major areas of crosscutting activities that touch on all analytic areas of AFR/SD/HRD-SARA—the expanding collaboration with African institutions and issues of dissemination and advocacy.
- ◆ Section IV summarizes SARA's activities in each analytic area in this project year.

II. Overview

Early in the fiscal year, SARA was assured of an expected one-year, no-cost extension to enable the project to operate through September 2005. This allowed us to maintain this year's momentum, start new activities, and build new relationships, as appropriate.

This year, SARA played an important role in supporting AFR/SD activities on orphans and vulnerable children (OVC). HIV-related nutrition work also continued to be a high priority, including analysis and presentations. SARA had a busy year working with the World Health Organization, Regional Office for Africa (WHO/AFRO), with a large multi-program review and collaboration on several technical areas: infectious diseases, reproductive health, and dissemination. More activity occurred in maternal and newborn health (MNH), partly due to AFR/SD's renewed interest in this area of work. SARA efforts in child health were focused on the review of USAID child survival programming in Africa, and advocacy on engaging private providers.

SARA's subcontracts with African institutions remained active this year. Good work continues with East, Central and Southern Africa Health Community Secretariat (ECSA, formerly CRHCS), especially on a range of issues related to HIV/AIDS, including the effect of HIV/AIDS on the workforce and nutrition-related aspects of the epidemic. CEFORP (the Center for Training and Research in Reproductive Health) is taking its place as the Postabortion Care (PAC) Secretariat in West Africa, and adolescent health work at CERPOD (the Regional Center for Research in Population and Development) is ongoing. Mwangaza Action was identified as a new partner in West Africa with expertise in social mobilization.

Agnieszka Sykes joined SARA as HIV/AIDS advisor in January 2004 after a few months of overlap with Stephen Kinoti, who left the project in March 2004.

SARA Goals

SARA project goals are to:

- ◆ Assist AFR/SD to develop and manage its strategic objectives and results;
- ◆ Increase the use of analysis and information through dissemination and advocacy in priority areas of AFR/SD concern;
- ◆ Develop linkages with African institutions that foster capacity-building, and produce quality analysis, dissemination, and advocacy;
- ◆ Implement analysis, dissemination, and advocacy activities for which SARA has a comparative advantage and that complement the efforts of other projects and donors; and
- ◆ Develop and promote the use of generic tools/instruments to improve the practice of health programs.

1. Assist AFR/SD to Develop and Manage its Strategic Objectives and Results

The AFR/SD–SARA strategic objective core teams met periodically during this fiscal year. The core teams shared information on activities, discussed strategies, and developed/managed scopes of work for selected AFR/SD-funded activities. SARA team members also maintained regular contact with AFR/SD colleagues through phone and electronic exchanges. Some key SARA support activities this year included:

- ◆ Implementing the “taking stock” of USAID child survival programming in Africa, including extensive interviewing of USAID mission staff and key informants;
- ◆ Producing and disseminating the report on USAID investments and programming approaches for malaria prevention and control in Africa;
- ◆ Preparing a State Department cable with guidance on cholera epidemic preparedness and response;
- ◆ Preparing and organizing the joint USAID–DFID review of five years of grants to WHO/AFRO;
- ◆ Assisting USAID/Mozambique to plan HIV-related nutrition interventions;
- ◆ Developing the AFR/SD maternal and newborn health Framework for Action;
- ◆ Developing a paper for USAID presenting evidence, gaps, and priority actions for nutrition and HIV/AIDS;
- ◆ Organizing a technical consultation on OVC in Washington;
- ◆ Planning and organizing a workshop in Africa on economic strengthening for OVC;
- ◆ Assisting to prepare sections of the AFR/SD annual report in some technical areas; and
- ◆ Representing AFR/SD at various technical meetings on nutrition, Integrated Management of Childhood Illness (IMCI), integrated disease surveillance and response (IDSR), reproductive health (RH), etc.

2. Increase the Use of Analysis and Information through Dissemination and Advocacy in Priority Areas of AFR/SD Concern

SARA dissemination staff participated actively in the technical core groups this year, working to make sure that dissemination and advocacy are an integral part of the various AFR/SD portfolios. The staff worked closely with AFR/SD colleagues on the large OVC meeting this year. SARA documents were again in high demand throughout the year, and much of this demand was electronic. An analysis of website statistics showed that several key SARA publications were downloaded in large quantities. The top three downloaded documents for this year include *Multisectoral Responses to HIV/AIDS*, *Qualitative Research for Improved Health Programs*, and *Prevention of Mother-to-Child Transmission (MTCT) of HIV in Africa: Practical Guidance for Programs*. In addition, several SARA publications were among the top 20 downloaded from USAID’s Development Exchange Clearinghouse (DEC) for at least one month. These documents included *Multisectoral Responses to HIV/AIDS*,

HIV/AIDS & Nutrition, and *The Health Sector Human Resource Crisis in Africa*. Of the approximately 15,444 printed documents distributed, about 23 percent were requested. SARA conducted a secondary dissemination effort that resulted in requests for over 12,000 copies of older, but still relevant, SARA publications.

SARA staff worked with African institutions on dissemination and advocacy issues. In particular, SARA participated with ECSA in hiring a new information specialist with the vision to lead communication activities within the institution. SARA staff helped this new specialist to develop a communication strategy which was presented at the 2004 ECSA Health Ministers conference. SARA also worked to strengthen the dissemination activities of WHO/AFRO's Vaccine Preventable Diseases (VPD) unit. This year, SARA shared the role of dissemination for IDSR in Africa with other WHO units in Geneva.

In summary, key activities in the area of dissemination and advocacy this year included:

- ◆ Organizing a large technical consultation in Washington, DC on orphans and vulnerable children;
- ◆ Providing technical guidance to ECSA in developing a communication strategy;
- ◆ Providing technical guidance and strategic thinking around dissemination issues for a new dissemination officer in the WHO/AFRO VPD unit;
- ◆ Producing 22 documents and 6 interactive CD-ROMs, many in 2 languages, and disseminating approximately 15,444 documents; and
- ◆ Assessing and documenting the use of 4 SARA publications.

3. Develop Linkages with African Institutions that Foster Capacity-building, and Produce Quality Analysis, Dissemination and Advocacy

The table on the following pages summarizes the key areas of SARA collaboration with African institutions this year.

4. Implement Activities in Analysis, Dissemination, and Advocacy for which SARA has a Comparative Advantage and that Complement the Efforts of Others

Illustrative activity highlights this year in the different technical areas included:

Child Survival

To take stock of USAID child survival programming in Africa, SARA reviewed child health trends, conducted a desk review of programming issues, and surveyed USAID missions and key informants. A summary of the findings and recommendations was presented at the USAID State-of-the-Art (SOTA) meeting in 2004.

- ◆ SARA organized an interagency steering committee meeting to prepare a global forum on engaging the private sector in child health and malaria.

Overview

Technical Area	Institution/Network	Collaborative Activities
Child Survival and Infectious Diseases	ECSA	<ul style="list-style-type: none">– Development of protocol for documenting innovative tuberculosis (TB)-HIV linkages
	WAHO	<ul style="list-style-type: none">– Review with program managers of progress towards Abuja goals– Advocacy for reducing taxes and tariffs for insecticide-treated nets (ITNs)
	WHO/AFRO	<ul style="list-style-type: none">– Integrated vector management (IVM) meeting support– IDSR Task Force meeting and planning– IMCI Focal Points meeting
Nutrition	WAHO	<ul style="list-style-type: none">– 9th Annual ECOWAS Nutrition Forum: 2004 focus on HIV and nutrition– Evaluation of the ECOWAS Nutrition Forum/networking
	ECSA	<ul style="list-style-type: none">– Development of two new Nutrition Briefs– PROFILES advocacy in two countries– Nutrition and HIV/AIDS advocacy– Preservice training manual for nurses and midwives on nutrition and HIV/AIDS
	RCQHC	<ul style="list-style-type: none">– Toolkit for counseling at community level– Preservice training on HIV and nutrition– Guidelines on people living with HIV/AIDS (PLWHA) nutrition care/support

Technical Area	Institution/Network	Collaborative Activities
Reproductive Health	ECSA	– Review of implementation guidelines for malaria in pregnancy
	CEFOREP	– Management of West Africa PAC secretariat
	CERPOD	– Adolescent health update
	MIPESA	– Guidance on advocacy training for network members
	Mwangaza Action	– Community mobilization for reproductive and child health
	RAOPAG	– Strategy development with the malaria in pregnancy (MIP) network in Francophone Africa
	WAHO	– Maternal and neonatal health strategy development
	WHO/AFRO	– Advocacy on maternal and neonatal mortality – Development of Road Map for MNH – Formative analysis for MNH
HIV/AIDS	CERPOD	– Rapid assessment of HIV/AIDS monitoring and evaluation (M&E) and management capacity in selected countries
	ECSA	– Revision of HIV/AIDS preservice curriculum – Assessment of HIV/AIDS impact on the health workforce
	NAP+	– Strengthening of NAP+ secretariat – Communications/information sharing – Tackling stigma
Dissemination and Advocacy	ECSA	– Dissemination and advocacy strategy development with new information specialist
	WHO/AFRO	– Support to VPD unit
Cross-cutting Issues	Afri-Health	– Networking of African public health schools

Overview

- ◆ SARA staff and consultants gave further assistance to WHO/AFRO in developing a protocol for USAID-funded qualitative assessments of newborn (and maternal) care at community level.

Infectious Diseases

- ◆ SARA produced and disseminated a comprehensive report on USAID investments and programming approaches for malaria prevention and control in Africa from 1999 to 2003.
- ◆ SARA staff worked with WHO/AFRO and the Environmental Health project (EHP) colleagues to plan and support a partnership meeting on Integrated Vector Management (IVM) for Malaria Control held in Douala, Cameroon.
- ◆ SARA provided technical support and materials to the Child Survival Collaborations and Resources Group (CORE) Malaria/IMCI Working Group and to two malaria in pregnancy networks (MIPESA and RAOPAG) to optimize the role of nongovernmental organizations (NGOs) and professional associations in the fight against malaria in Africa.
- ◆ SARA finalized, produced, and disseminated study findings on tuberculosis and gender in Tanzania, in collaboration with HealthScope, Tanzania's Ministry of Health (MOH), and ECSA.

Nutrition

- ◆ SARA developed a paper presenting evidence, gaps, and priority actions for nutrition and HIV/AIDS. Through the Office of the Global AIDS Coordinator (OGAC), SARA also contributed to incorporating nutrition issues into the President's Emergency Plan for AIDS Relief. SARA participated in arranging the Plan's application in Mozambique.
- ◆ SARA staff contributed to the analysis of data from Africa, showing the importance of exclusive breastfeeding for child survival in areas of high HIV prevalence. Two papers from the ZVITAMBO analyses were accepted for publication.
- ◆ Workshops were organized with program managers and nutritionists from 70 national and international NGOs from six Francophone countries to introduce them to essential nutrition action tools and approaches.
- ◆ SARA helped to finalize a counseling tool for nutrition and HIV/AIDS at the community level, working with the Regional Centre for Quality of Health Care (RCQHC) and other cooperating agencies (CAs). The tool is currently being used by four national institutions in Uganda.
- ◆ SARA staff organized a technical update on nutrition and HIV/AIDS at the 9th Economic Community of West African States (ECOWAS) Nutrition Forum in West Africa, that included representatives from nutrition and HIV/AIDS programs from 13 countries.

HIV/AIDS

- ◆ SARA organized a regional workshop on economic strengthening for communities and households supporting OVC. As a result, a network for this issue was established in East and southern Africa.
- ◆ SARA helped to prepare the findings from Kenya and Malawi assessments on *Challenges Facing the Health Workforce in the Era of HIV/AIDS*, which were presented at the 2003 ECSA Regional Health Ministers Conference. SARA repackaged the country reports and developed summary briefs to serve as the basis for dialogue with key stakeholders in the two countries.
- ◆ Responding to high demand, SARA translated the AED HIV/AIDS stigma toolkit into French and disseminated the English version on a CD-ROM to 50 African organizations. SARA also disseminated a video on stigma entitled “Malian Women Speaking Out” to 165 African organizations.
- ◆ SARA gave technical support to develop a West African Health Organization (WAHO) proposal for strengthening HIV/AIDS prevention and control in the military of ECOWAS member countries. The proposal was accepted by the U.S. Department of Defense for potential funding next year.

Reproductive Health

- ◆ SARA helped to refine WAHO’s subregional maternal and perinatal strategy. The strategy was formally endorsed by ECOWAS member states this year.
- ◆ SARA staff helped to develop USAID’s strategic framework to reposition family planning.
- ◆ SARA assisted WHO/AFRO and its partners to develop the African Regional Roadmap to Reduce Maternal and Newborn Morbidity and Mortality. Family planning was included as a key component in the roadmap. Sixteen countries are already at various stages of implementation.
- ◆ On behalf of the Francophone African PAC Initiative, SARA produced and disseminated a reference document on scaling up PAC services in Francophone Africa, published in English and French.
- ◆ SARA efforts helped to establish CEFORP as the subregional PAC secretariat, and to identify Mwangaza Action as a regional resource for social mobilization.

Cross-cutting Issues

- ◆ SARA worked with AfriHealth, a project of the University of Pretoria’s School of Health Systems and Public Health (SHSPH), to organize a consultative meeting on partnerships for strengthening public health education capacity in Africa.
- ◆ SARA staff played a key role in preparing and implementing a review of USAID and DFID support to WHO/AFRO over the past five years.

5. Develop and Promote the Use of Generic Tools/Instruments to Improve the Practice of Health Programs

Counseling Tools on HIV and Infant Feeding

SARA finalized the package of counseling tools for helping health workers to counsel HIV-positive mothers about infant feeding issues. These tools, developed by WHO with technical support from SARA, include a set of generic counseling cards and take-home flyers, a technical reference guide for health workers, and an orientation manual. The final materials will be produced in early 2005.

HIV/AIDS and Nutrition Counseling Toolkit for Community Level

SARA helped to finalize a counseling tool for nutrition and HIV/AIDS at community level, working with RCQHC and other CA partners. The tool is currently being used by four national institutions in Uganda.

Nutrition and HIV/AIDS Preservice Curriculum for Nurses and Midwives

SARA helped to develop a preservice training curriculum on nutrition and HIV/AIDS for nurses and midwives, in collaboration with ECSA.

Essential Nutrition Actions (ENA) Training Modules for Francophone Africa

SARA edited and translated the ENA modules this year. The modules were finalized in collaboration with BASICS. They are available on CD-ROM and will be further disseminated next year.

Toolkit for Working with Private Providers in Child Health

The Toolkit, which SARA is developing in close collaboration with WHO Child and Adolescent Health Division (CAH) and the Health Communications Partnership (HCP), is currently being reviewed by CAH and AFR/SD. More than 65 tools and papers have been collected so far for the searchable CD-ROM, which will be attached to the printed overview paper. An annotated bibliography of the tools and papers has also been developed and will be included in the CD-ROM. The package should be finalized in early 2005.

III. Activities Affecting All AFR/SD Health and Human Resources Strategic Objectives

A. Collaboration with African Institutions and Networks

AfriHealth – University of Pretoria, South Africa

SARA worked this year with AfriHealth, a project of the University of Pretoria's School of Health Systems and Public Health (SHSPH), to organize a consultative meeting on partnerships for strengthening public health education capacity in Africa. The meeting was held in Pretoria in April 2004. SARA and the Council on Health Research for Development (COHRED) worked with AfriHealth to plan and organize the meeting and to disseminate the meeting report. This activity helped to strengthen the position of SHSPH as the coordinator of AfriHealth, an incipient network of African public health institutions.

CEFOREP – Center for Training and Research in Reproductive Health, Senegal

SARA supported CEFOREP in assuming the responsibilities of the Francophone PAC Initiative Secretariat from IntraHealth. SARA helped to develop a scope of work and a budget for planned activities, including a regional meeting with PAC country focal points, to be held December 2004. SARA also helped CEFOREP identify areas of collaboration on PAC advocacy and scale-up with AWARE-RH. A no-cost extension was approved for the SARA-CEFOREP purchase order, which covers their activities as PAC Secretariat. Some deliverables have been accomplished (e.g., revitalizing the country focal points, country updates on PAC activities, collection of PAC materials). SARA is hoping that other agencies will come forward to co-fund CEFOREP's continued Secretariat role in 2005.

CERPOD – Regional Center for Research in Population and Development, Mali

The SARA-CERPOD subcontract this year covered activities on adolescent reproductive health (ARH) and HIV/AIDS. Results from the CERPOD regional ARH analysis were refined, and are being packaged into an advocacy document for wide dissemination. A subregional meeting is planned for early 2005 to highlight the findings and stimulate increased attention to ARH in the Sahel.

Last year, under the subcontract, CERPOD carried out a rapid assessment of the HIV/AIDS Monitoring and Evaluation (M&E) and management capacity in five West African countries. The assessment was part of a subregional activity jointly organized by the USAID West Africa Regional Program (WARP), Family Health International (FHI), WAHO, the Joint United Nations Programme on HIV/AIDS (UNAIDS), CERPOD, and the MEASURE Evaluation project. The findings were used to help prepare and inform a multi-county regional meeting, held in November

Collaboration with African Institutions

2003, to discuss capacity development needs to improve the M&E of national AIDS control programs. CERPOD is using the findings of the assessment to develop proposals, e.g., for the AWARE-HIV/AIDS project, and to plan technical support to countries on HIV/AIDS M&E.

ECSA – Commonwealth Regional Health Community Secretariat for East, Central, and Southern Africa, Tanzania

ECSA (formerly CRHCS) made progress this year in replacing its HIV/AIDS advisor (after a seven-month vacancy) and in recruiting a dynamic senior information specialist. The Secretariat had been without an information coordinator for some years, and this position—for the moment funded by SARA and the Population Reference Bureau's (PRB) Gates Foundation grant—will be important in reinstituting more dynamic information sharing on priority issues in the region.

The following activities were the focus of SARA-ECSA work this year:

Documenting TB-HIV/AIDS Program Linkages

Dr. Sambe Duale participated in electronic consultations with ECSA and technical partners on planning the documentation of innovative TB-HIV-linked program interventions in selected countries in the region. ECSA is planning to organize a small expert working group meeting to develop protocol and tools, and to hire two consultants to conduct the exercise. SARA will provide technical input and assistance with the packaging of findings.

Reviewing National Policies and Guidelines on Malaria and Pregnancy

SARA provided technical and financial support (jointly with REDSO) to ECSA to review national policies and guidelines on preventing and controlling malaria in pregnancy (MIP) in the subregion. The review findings were presented to the Directors Joint Consultative Committee (DJCC) and will be used to design advocacy and technical support activities to assist countries in moving the MIP agenda forward.

Linking ECSA with Partners for Priority RH Issues

SARA staff linked ECSA with PATH for the advocacy training workshop for the Malaria in Pregnancy in Eastern and Southern Africa Coalition (MIPESA). ECSA presented the country MIP review findings at the workshop and will assist with follow-up of advocacy plans. SARA also linked ECSA with YouthNet for its regional workshop on advocacy for youth reproductive health in Tanzania in May 2004. ECSA presented its relevant work and will assist with country follow-up of advocacy plans.

Providing Technical Input on Nutrition Issues

SARA staff provided technical assistance to review two new briefs on Nutrition in Times of Emergencies and Multi-sectoral Approaches to Combating Micronutrient

Deficiencies. SARA also provided technical input to a presentation for the DJCC meeting on nutrition and HIV/AIDS and helped to plan and organize in-country PROFILES presentations in Swaziland and Zambia.

Technical Input on the Impact of HIV/AIDS on the Health Workforce

Dr. Stephen Kinoti presented at the November 2003 Health Ministers Conference and assisted the Kenya and Malawi teams in presenting their findings. Ms. Agnieszka Sykes worked closely with ECSA staff and consultants to review, improve data presentations, finalize, and package the Kenya and Malawi reports on this issue.

HIV/AIDS Preservice Training

Ms. Sykes reviewed the follow-up of preservice training improvements with ECSA staff. She also shared a proposed monitoring tool for tracking the progress of the preservice training curricula activity.

Mwangaza Action, Burkina Faso

SARA facilitated contacts between Mwangaza Action and AWARE-RH advisors to define joint activities. SARA worked closely with Mwangaza Action to finalize a subcontract to fund a regional working group meeting on best practices for social mobilization (to be held in 2005) and to strengthen capacity in data analysis and dissemination.

NAP+ – Network of African People Living with HIV/AIDS, Kenya

SARA continued to support NAP+ activities in promoting communication (i.e., the “Positive Voice” newsletter), supporting greater involvement of people living with HIV/AIDS (GIPA), and tackling stigma (Ambassadors for Hope toolkit). SARA also supported various strategic meetings such as NAP+’s midterm review and board meeting. SARA arranged for a NAP+ program officer to attend the Economic Strengthening for OVC meeting in Tanzania.

MIPEsa – Malaria in Pregnancy in Eastern and Southern Africa Coalition, Uganda

SARA provided technical support and background materials for a MIPEsa advocacy workshop held in January 2004. SARA also contributed technically to a MIPEsa proposal to the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) this year. This was unfortunately not successful on the first round.

RAOPAG – Malaria in Pregnancy Network for West Africa, Benin

SARA staff attended the RAOPAG launching meeting held in Benin in October 2003, and also facilitated discussions between the RAOPAG coordinator, the AWARE-RH project, WHO/AFRO, and other interested parties. The intent was

Collaboration with African Institutions

to help identify strategies for joint support to move network activities forward in West Africa, e.g., advocacy training for RAOPAG members, modeled on the MIPESA experience.

RCQHC – Regional Centre for Quality of Health Care, Uganda

SARA worked with RCQHC on several activities to improve policies, capacity, and programming related to nutrition care and support of PLWHA. These activities included:

- ◆ Developing a nutrition and HIV/AIDS counseling toolkit for community-level counselors and PLWHA. This was a Regional Economic Development Services Office for East and Southern Africa (REDSO)-supported activity, in collaboration with LINKAGES and FANTA. The materials were pretested and produced in August 2004.
- ◆ Developing a preservice training manual and supporting materials on HIV and nutrition, in collaboration with the Food and Nutrition Technical Assistance Project (FANTA), LINKAGES, and REDSO. The complete training package was disseminated by RCQHC this year.

WAHO – West African Health Organisation, Burkina Faso

Collaboration with WAHO this year has taken place in several technical areas, including:

Nutrition

SARA staff worked with the International Planning Committee to organize the 9th Annual Nutrition Forum, held in Cotonou, Benin, in September 2004, under WAHO auspices. SARA organized the technical update session titled *Nutrition and HIV/AIDS: Opportunities and Challenges* and provided partial funding for the Forum.

Malaria

SARA facilitated ongoing dialogue between WAHO and the NetMark project on developing joint advocacy activities on insecticide-treated nets (ITNs) in West Africa. SARA staff also provided input in planning the Roll Back Malaria's West Africa Network (RBM/WARN) and WAHO-sponsored workshop to bring national malaria control managers from ECOWAS member countries together to review progress and constraints in achieving the Abuja RBM goals. This workshop was held in June 2004 in Burkina Faso.

HIV/AIDS

SARA staff provided technical support for planning and organizing the WAHO-sponsored workshop for Joint Chiefs of Staff and Directors of Medical Services of ECOWAS member country armed forces. The workshop was held to update and validate a subregional proposal for strengthening HIV/AIDS prevention and con-

trol in the military, especially during peacekeeping missions. The February 2004 workshop was held in Ghana. It was recommended that the updated and validated proposal be packaged for submission to the ECOWAS Security Council, the U.S. Department of Defense, GFATM, and other potential donors.

SARA assisted WAHO staff with arranging meetings in Washington with various interested parties at the Pentagon, the National Institutes of Health/National Institute of Allergy and Infectious Diseases (NIH/NIAID), USAID, the World Bank, the Clinton Foundation, and FHI to discuss WAHO's strategic plan for addressing HIV/AIDS in the ECOWAS region.

SARA staff joined a team of resource persons at a subregional workshop in Senegal to create consensus among the country coordinating mechanisms' (CCMs) ECOWAS proposals to the GFATM. Dr. Duale participated in a small team that worked after the workshop to finalize a proposal submitted for Round 4 of the GFATM. Unfortunately the proposal was not funded, despite having received a good review.

Maternal Health

SARA staff provided technical input during the regional workshop with ECOWAS RH program managers on developing a WAHO subregional strategy to reduce maternal and perinatal morbidity and mortality. The meeting was held in Ghana in November 2003.

WHO/AFRO, Zimbabwe and Congo

Collaboration with WHO/AFRO this year has taken place in several technical areas:

Evaluation of USAID and DFID Grants to AFRO

SARA staff members worked with staff from USAID/AFR/SD, WHO/AFRO, and DFID to plan and conduct the review of the implementation of USAID and DFID grants to WHO/AFRO for disease control and reproductive health from 1999 to 2003. This included a desk review, focused on-site interviews in Harare, and self-assessment questionnaires for WHO/AFRO staff at intercountry and country levels. A three-day joint WHO/AFRO, USAID, and DFID review workshop was held in Harare in March 2004 to discuss issues, finalize the review, and prepare for the next USAID grant agreement.

Dissemination and Advocacy

SARA provided technical guidance and strategic thinking around dissemination issues for a new dissemination officer to strengthen WHO/AFRO's VPD unit to design, produce, and disseminate key materials strategically. A draft communication strategy for the unit was finalized during the SARA visit.

Collaboration with African Institutions

Integrated Disease Surveillance and Response

SARA staff provided technical input for the 5th IDSR Task Force meeting held June 2004 in Zimbabwe. WHO/AFRO expects SARA to play a critical role in implementing several IDSR activities next year, including developing a regional IDSR strategy for epidemic preparedness and response.

TB-HIV-linked Interventions

SARA staff met with the WHO/AFRO Tuberculosis Unit to discuss how to coordinate activities with ECSA and SARA on documenting best practices in implementing TB-HIV/AIDS collaborative activities.

Child Survival

SARA staff attended the IMCI Focal Points meeting, held in July 2004 in Burkina Faso. Discussions with country representatives and WHO staff highlighted the potential for fruitful partnerships with USAID, particularly in DR Congo, Ethiopia, Guinea, Madagascar, Mozambique, and Tanzania.

Reproductive Health

SARA staff helped facilitate sessions and draft recommendations at the WHO/AFRO RH Task Force Meeting in October 2003, and also attended the RH Program Managers meeting. SARA assisted in drafting the Roadmap to accelerated MNH in Africa, getting it endorsed by partners, and developing guidelines for its adaptation/application at country level. SARA also assisted WHO/AFRO to develop a formative analysis protocol to assess maternal and newborn care at the community level. SARA provided input to the WHO/AFRO/RH overall proposal to AFR/SD this year.

Integrated Vector Management for Malaria Control

SARA staff worked with WHO/AFRO and Environmental Health Project (EHP) colleagues to plan the 2nd integrated vector management (IVM) Partnership Meeting held April 2004 in Douala, Cameroon. SARA arranged for representatives from West African regional partner institutions (e.g., Institut de Recherche en Science de la Santé in Bobo Dioulasso, Burkina Faso and Malaria Research and Training Centre in Bamako, Mali) to participate in the meeting.

B. Dissemination and Advocacy

Renuka Bery	Dissemination and Advocacy Manager
Antonia Wolff	Dissemination Specialist
Rebecca Nigmann	Meeting Coordinator/Program Associate for Publications
Raymond Lambert	Publications Coordinator
HJ Lee Bennett III	Computer Specialist
Fari Fouladi	Dissemination Assistant

Introduction

Again this year, the dissemination team has carried out dissemination and advocacy activities in collaboration with U.S.-based and African organizations. Activities continue to be Africa-focused in support of key AFR/SD strategic areas. They have involved materials production and dissemination, electronic communications, and building the capacity in Africa to disseminate and advocate more effectively. ECSA (formerly CRHCS) has again hired an information dissemination coordinator, funded jointly through SARA and PRB's Gates Foundation grant. SARA was instrumental in developing the process for selection and worked with ECSA to develop a communication strategy. SARA continued to share its dissemination and advocacy expertise with other USAID projects.

The dissemination team remains strong and personnel have been constant throughout this year, except for a change in the dissemination assistant. Renuka Bery and Antonia Wolff continue to provide dissemination support to the SO teams. Rebecca Nigmann has supported several meetings including the very large and visible OVC Technical Consultation held in early November 2003. Raymond Lambert has taken the lead on several publication efforts that include coordinating the private providers toolkit. Lee Bennett has provided essential graphics design support and has worked with the Africa Bureau Information Center and SARA to ensure smooth website development. Fari Fouladi replaced Jean Marceau Lohier as the dissemination assistant and distributed documents through the mail and electronically.

Support to AFR/SD Activity Managers in SOs 19-22

SARA dissemination team members have continued to meet with Africa Bureau strategic objective team members both formally and informally. The core groups have continued to function somewhat erratically this year, perhaps due to reductions and changes in Africa Bureau staff. SARA's dissemination team has kept abreast of the different activities within each sector and has ensured that dissemination and advocacy activities are properly addressed in the different technical areas.

SO 19—Child Survival, Nutrition, Infectious Diseases, Health Care Financing

Renuka Bery, Antonia Wolff, Raymond Lambert, and Rebecca Nigmann worked closely with SARA and AFR/SD technical staff in the areas of child survival, nutrition and infectious diseases on a number of documents and tools that are being developed by SARA and other partners. The private providers' toolkit has undergone several iterations and is currently being reviewed by AFR/SD and the World Health Organization, Child and Adolescent Health Division (WHO/CAH).

Ms. Bery has been very involved in the development and refinement of the child survival assessment, Taking Stock. This began with products developed for the USAID's Health, Population and Nutrition (HPN) Officers SOTA meeting in South Africa in June and has just been completed, with the final version being distributed to USAID in early October 2004. SARA worked with the Population, Health & Nutrition Information project to finalize the *USAID Malaria Programs in Africa* report, which SARA then formatted, printed, and disseminated.

SO 20—Reproductive Health

Antonia Wolff and Rebecca Nigmann continued to provide dissemination assistance to the RH core group. Last year, Ms. Wolff provided technical guidance on a CD-ROM developed and produced by JHPIEGO. The CD is a compilation of best practices produced during the Santé Familiale et Prévention du SIDA (SFPS) project. SARA finalized, replicated, and disseminated the CD widely over the course of the year.

In March, Antonia Wolff met with the Policy project on packaging and dissemination of Focal Group Discussion findings in Kenya and Zambia. The studies were conducted by the Policy project, in collaboration with SARA, to explore trends in Zambia's and Kenya's family planning (FP) program in the context of high HIV/AIDS prevalence. The reports were disseminated in the two countries and to USAID's partners. Ms. Wolff also worked with Policy and AFR/SD to send the Kenyan and Zambian USAID missions e-copies of case studies. SARA is currently working on finalizing two policy briefs based on these studies and will target program managers and policy makers. Missions will be able to disseminate them nationally.

In May, Antonia Wolff participated in the Health Information and Publications Network (HIPNET) meeting on FP and HIV/AIDS Integration. This is a group of communication experts who articulated a need to bring together all the CAs to identify resource needs related to FP/HIV integration, create a shared vision to best support these needs, identify existing information resources, develop a plan for future collaboration, and identify subgroups to lead the prioritized initiatives. The group identified collaboration, evidence-based research, advocacy and communication, product development and dissemination as priority needs. Ms. Wolff and Holley Stewart helped the HIPNET working group identify needs for future publications and communications materials related to FP/HIV-AIDS Integration.

The Postabortion Care West Africa report was published in the third quarter following a series of reviews around the sensitive language. The first English printing was completely distributed, with over 1,100 copies being sent to 22 organizations mostly in Africa. More English copies are needed and have been reprinted (500). The French version is currently being disseminated. Ms. Bery and Ms. Stewart are serving as co-chairs of the PAC Consortium's communication working group this year.

SO 21—HIV/AIDS

Renuka Bery worked closely with Peter McDermott and Linda Sussman to organize a technical update on orphans and vulnerable children in Africa. This small meeting evolved into a very large and high profile three-day workshop. This workshop shared state-of-the-art information on orphans and vulnerable children and engaged participants in more in-depth discussions during small group sessions on days two and three. Mr. Randall Tobias gave the keynote address and Ms. Graca Machel was the featured speaker. This meeting was well attended (over 300 people) and operated without any technical glitches. The participants overwhelmingly cited the value of this conference and USAID highlighted its plans to share this information in some Africa-wide conferences. The meeting report was finalized and disseminated following approval from USAID.

In preparation for this technical consultation, SARA hired a consultant to prepare a background document on the state of the science of orphans and vulnerable children. This document is an important contribution to the work on children affected by HIV and AIDS in Africa. This document will be published in the final year of the SARA project, following extensive comments by outside reviewers.

Renuka Bery worked closely with SARA HIV/AIDS Advisor Agnieszka Sykes to repackage the analysis conducted by ECSA on human resources challenges from the HIV/AIDS epidemic in Kenya and Malawi. They identified consultants to repackage the reports and worked closely with the principle investigators to reconcile some of the confusing data. While in Arusha working with ECSA to develop a communication strategy, Ms. Bery also worked with Dr. Kenneth Chebet to develop a one-day workshop agenda on human resources and to hone the presentation for disseminating this study in Kenya, scheduled for October 2004.

Ms. Bery worked closely with Ms. Sykes to develop the agenda for a regional workshop on economic strengthening and children affected by HIV/AIDS. This meeting was held in Tanzania and facilitated by Ms. Sykes.

Dissemination and Advocacy Skills in Africa

Support to ECSA

Renuka Bery assisted ECSA with the recruitment process for the information coordinator position. The process included analyzing the curriculum vitae received and

Dissemination and Advocacy

developing a written evaluation for the top five candidates. The process was critical in identifying the top candidate, who would otherwise have been eliminated in an earlier round. Mr. James Watiti was hired and seems to have been an excellent choice.

Ms. Bery and Dara Carr from PRB have had regular phone meetings with Mr. Watiti to finalize the workplan and to identify key new activities for the coming year. In addition, Ms. Bery traveled to Arusha to work with Mr. Watiti. Following technical meetings on dissemination and information with each program coordinator, Ms. Bery and Mr. Watiti developed a draft communication strategy to share and adapt with the technical coordinators at ECSA. In addition, space has been given to the information program to present the communication strategy at the 40th Conference of Health Ministers in November 2004. Mr. Watiti presented the draft strategy to the entire ECSA technical team and to the Minister of Health from Zambia, Dr. Brian Chituwo, the current chairperson for the Conference of Health Ministers, who was visiting ECSA to prepare for the November meeting. It was clear that information is a critical aspect of ECSA's mandate, and Ms. Bery and Mr. Watiti are planning to hold a dissemination forum with ECSA technical coordinators to ensure that technical managers understand their role in the dissemination process. While in Arusha, Ms. Bery also discussed the importance of communication and information issues with Dr. Chituwo. This was a chance to promote the community core group mechanism that was recommended by the 2002 task force.

The community core group mechanism has been implemented by the Seychelles to coordinate country activities that relate directly to ECSA. The members include all the ECSA focal persons as well as the members of the ECSA governing bodies such as the DJCC and the permanent secretary. The communication strategy suggested adding a senior-level information focal person to coordinate the core group and serve as a liaison with ECSA.

Support to WHO/AFRO/VPD Unit

In October 2003, Antonia Wolff made a presentation on SARA support to WHO/AFRO and its partners at the Global Consultation on Strengthening National Capacities for Surveillance Response and Control of Communicable Diseases in Geneva. The presentation highlighted the documentation and dissemination of lessons learned in implementing the Integrated Disease Surveillance and Response strategy. The meeting recognized the need for increased advocacy to mobilize resources for strengthening surveillance, preparedness, and response systems.

In November 2003, Antonia Wolff travelled to the WHO/AFRO to provide technical guidance and strategic thinking around dissemination issues for the new dissemination officer, Zora Machekanyanga. The purpose of the trip was to strengthen the capacity of WHO/AFRO/VPD unit to design, produce, and disseminate key materials. Ms. Wolff and Ms. Machekanyanga presented a brief overview of dissemination issues, clarified the dissemination officer's roles and expectations within VPD, and prioritized VPD's information needs and recommendations. More than

25 VPD staff were present, including the unit's director, Dr. Deo Nshimirimana. In early 2004, a new communications dissemination strategy was finalized and integrated into WHO/AFRO's biannual workplan. Ms. Wolff also provided guidance to VPD staff on systematizing the dissemination process.

Support to MIPESA

In late 2003, the SARA team discussed advocacy issues and possible joint activities with Michelle Folsom at PATH, who was organizing an advocacy workshop for the Malaria in Pregnancy in East and Southern Africa Coalition (MIPESA). SARA provided workshop members with the SARA Advocacy Guide and several hundred copies of *Lives at Risk: Malaria and Pregnancy* to distribute at country level.

Production and Dissemination

This year was another full production year for the dissemination team. SARA produced 25 publications, 6 CD-ROMs, and 30 trip reports; fulfilled over 1,500 requests; and disseminated over 15,000 documents around the world. The publications ranged from analyses and conference/meeting reports to policy briefs and advocacy brochures. As in the past, almost all of the design, formatting, and editing was accomplished in-house, and documents were translated as appropriate. SARA also reprinted several popular publications, such as *Utilizing the Potential of Formal and Informal Private Practitioners in Child Survival* and English and French versions of *An Introduction to Advocacy*.

Ms. Bery and SARA Publications Coordinator Raymond Lambert worked with the CHANGE project to include *Understanding and Challenging HIV Stigma: Toolkit for Action* in a mailing to disseminate a videotape on reducing HIV stigma that was sent to the Society for Women and AIDS in Africa (SWAA) and NAP+ networks. The project has received several letters and emails highlighting the usefulness of this videotape and the stigma toolkit. SARA also agreed to adapt and translate the toolkit into French. This will be completed in the final year of the SARA project.

The SARA dissemination team meets regularly to ensure that it remains proactive and able to meet and prioritize multiple demands in an efficient and effective manner. Since dissemination work sometimes seems intangible, SARA produces a monthly report of the dissemination team's major activities. This monthly report informs both SARA project staff and the AFR/SD team of the various tasks undertaken and the status of key publications.

Renuka Bery hired a consultant, Jeff Pelletier, to assess the current status of available publications and work with each technical area in developing secondary dissemination strategies for publications that were still on SARA shelves. Mr. Pelletier used his wide network of contacts to share information about the SARA documents still available. The groups reached included USAID missions and Bureau for Global Health (GH) contacts, training schools, research institutes, MOHs, information dissemination centers, networks, national and international private voluntary orga-

Dissemination and Advocacy

nizations and NGOs, WHO/AFRO, and World Bank. As a result, over 12,000 older publications have been requested and are being disseminated. This speaks to the expressed need of users, particularly in Africa, who welcome hard-copy publications.

SARA is also collaborating with Kabissa, an organization that promotes the use of information and communication technologies in Africa, to distribute materials to participants in Kabissa's training-of-trainers workshops for West African civil society organizations. The workshops are part of its Time to Get Online program to build basic skills for effective use of the Internet and to create a set of strategies that organizations can apply directly to their particular field of work. Each new trainer will receive 30 copies of SARA's *Making the Internet Connection Count: Effective Use of the Internet in Seven Steps* for use in the trainings they will conduct.

Ms. Bery has also met consistently with HIPNET and discussed a proposal to participate in a joint shipment of publications to health libraries and information centers around the world that need documents. Ms. Bery is exploring the possibility of shipping documents to the information centers located in Africa.

Tracking Publications and Monitoring Their Use

SARA's dissemination and tracking systems remain fully operational and useful. Statistics can be synthesized from the tracking system to help determine where the products go, when, how many, whether requested, etc. SARA's database now has the ability to track dissemination of electronic documents, in addition to hard copies, as the project has increased the number of publications disseminated electronically. Some distribution statistics are compiled at the end of this section of the annual report.

SARA Consultant Jeff Pelletier also started to document use of five SARA publications (*HIV and Nutrition, Prevention of Mother-to-Child Transmission of HIV in Africa, Health Sector Human Resource Crisis in Africa, Utilizing the Potential of Formal and Informal Private Practitioners in Child Survival in Uganda, Best Practices and Lessons Learned for Sustainable Community Nutrition Programming*). He was able to complete one in this time period (*HIV and Nutrition*) and the other SARA dissemination staff have each agreed to follow up on one other so that all five will be completed by the end of the 2004 calendar year. Rebecca Nigmann assessed the *Lives at Risk: Malaria and Pregnancy* brochure. The strategy for monitoring document use includes reviewing the tracking system data collected and reports, reviewing requests for and letters about the publication, and following-up with users who have requested more than 20 copies of the publication. Summaries of the findings are described below:

HIV and Nutrition

Respondents were supportive of this publication. It was cited as a positive reference for informing doctors of the relationship between HIV/AIDS and nutrition. Other respondents noted that evaluating the impact of this or any other piece of

informational material to any consequential policy change cannot usually be linked to any one such factor but rather as the result of many factors. One respondent from Helen Keller International (HKI) commented that, “The document is the best survey dealing with nutrition and HIV/AIDS and we will continue giving it to other NGOs and communities.”

Over 6500 copies of *HIV and Nutrition* have been distributed in English and French, of which 98 percent were requested. Most of the documents were distributed in Africa or sent to international organizations that redirected copies to their field offices in Africa. It is one of the most downloaded documents on the SARA website and continues to be requested. It was distributed at nine workshops in Africa. Though not scientific, a Google Internet search yielded 24 different locations on which to find this document. However, these are subject to change.

Lives at Risk: Malaria and Pregnancy

Over 17,000 copies of *Lives at Risk: Malaria and Pregnancy*, have been distributed – 12,952 in English, 3,339 in French, and 948 in Portuguese. The document was revised and reprinted in English in July 2003 and in French in December 2003. It has been used for advocacy with policy makers, informing researchers, nurses, midwives, and other healthcare providers, journalists, and students. The Regional Centre for Quality of Health Care included the brochure in its 2001 calendar devoted to Malaria that was sent to 4000 people. Also of note, governments, NGOs and universities have distributed them to district-level clinics and hospitals and to field workers. According to feedback, users have found it “clear and informative” and “useful especially for teaching as reference materials.” WHO/AFRO feedback from some of national program managers indicated that “this document is a very useful and simple tool at country level.”

Electronic Communications

This year, SARA expanded its use of electronic resources to disseminate information. SARA produced five CD-ROMs this year and distributed more documents electronically. A variety of listservs were used to inform audiences in Africa and the U.S. about SARA documents—new and old—including Afro-nets, and SARA documents are available on PRB’s Population and Health Infoshare, World Bank’s Development Gateway, USAID’s Knowledge Management website.

Website

SARA continued to provide assistance as necessary in the redesign of USAID’s Africa Bureau web pages. However, USAID decided that most information will be available through the Global Health website.

SARA followed through with plans to develop a comprehensive site for the Orphans and Vulnerable Children Technical Consultation that took place in early November 2003. In particular, SARA Computer Specialist Lee Bennett developed a

Dissemination and Advocacy

sub-site on the SARA website specifically for individuals interested in the OVC Technical Consultation conference. This site was initially an information resource for prospective participants to register for the conference, decide what meals they wanted, and examine presentations, publications, materials, and resources directly related to the conference. Online visitors still use this site and have been downloading the *OVC Technical Consultation Final Meeting Report*.

SARA also switched web servers, which is intended to give the site better security, more space, and better stability.

Quarterly Publications Mailing Distribution

For four years now, Antonia Wolff has disseminated an electronic publications list on a quarterly basis. This list is directed to USAID missions, global and field-based HPN officers, desk officers, Mission Directors, African regional institutions, and various other CAs to keep them informed of AFR/SD's health-related activities. Distribution has grown from an initial 150 to 373 recipients. This list generates responses and requests for materials (at least 5-10 per quarter) and is updated each quarter to keep up with changes in personnel, transfers, etc.

CD-ROM Development and Distribution

CD-ROM duplication has increased dramatically over the past year, especially with USAID emphasizing electronic over print dissemination. Still, most organizations do not know to what extent CD-ROMs are being used in Africa. While CD-ROMs are much cheaper to produce, they still require the information user to have regular access to a computer with a CD-ROM drive and be willing to review materials on the computer. Then, if material is desired, it can be printed if printing facilities and resources are available. To try to assess whether CD-ROMs are a viable dissemination mechanism, Renuka Bery has arranged to administer the questionnaire on CD-ROM use at two forums in Africa: the Association for Health Information and Libraries in Africa (AHILA) conference in Malawi in October 2004 and the Conference of Health Ministers in Zimbabwe in November 2004. SARA and ECSA will analyze the responses and share the information as widely as possible.

Working with U.S. and European Groups

Members of the SARA dissemination team gave support and guidance on dissemination, communication, and advocacy issues to a number of U.S. groups. While most of the support is described under the technical areas in which the support was given, below is a list of the groups that the dissemination team supported. The support took the form of consultations, participation in meetings, presentations, and conference exhibits.

- ◆ Africa Bureau Information Center
- ◆ Advance Africa

- ◆ BASICS II
- ◆ Catalyst
- ◆ Centers for Disease Control and Prevention (CDC)
- ◆ CHANGE
- ◆ COHRED (Council on Health Research for Development)
- ◆ Dot.Com
- ◆ FANTA
- ◆ FHI
- ◆ JHPIEGO
- ◆ Johns Hopkins University's Center for Communication Programs (JHU/CCP)
- ◆ Kabissa
- ◆ LINKAGES
- ◆ Minority Health Professions Foundation (Historically Black Colleges and Universities)
- ◆ Program for Appropriate Technologies in Health (PATH)
- ◆ PHNI Project
- ◆ RBM Consortium
- ◆ The Futures Group International
- ◆ WHO

**Information Dissemination
Annual Summary
October 2003 - September 2004**

Technical Assistance

- ◆ 2 TDYs related to dissemination and advocacy
- ◆ 8 dissemination and advocacy advisory meetings with CAs
- ◆ 4 dissemination and advocacy presentations
- ◆ 4 institutions in Africa receiving explicit dissemination and advocacy guidance
- ◆ 7 DC-based meetings on dissemination and advocacy

Electronic Update

- ◆ Most downloaded web-based documents from the SARA website:
 - *Multisectoral Responses to HIV/AIDS*
 - *Prevention of Mother-to-Child Transmission of HIV in Africa*
 - *HIV/AIDS—A Humanitarian & Development Crisis: Addressing the Challenges for PVOs & NGOs in Africa, Conference Report*
 - *Des vies menacées : le paludisme pendant la grossesse (nouvelle édition)*
 - *Recherche qualitative pour des programmes de santé améliorés*
- ◆ 609 new names/organizations added to database

Publications—Final

- ◆ 28 publications (22 documents and 6 interactive CD-ROMs)
- ◆ 5 documents translated
- ◆ 30 trip reports
- ◆ 20 covers created in-house
- ◆ 3 reprints

Publications in Production

- ◆ 9 in production

Distribution

- ◆ 15,444 documents sent
- ◆ 673 documents were requests [23% of total distribution]
- ◆ 30% (505) of these documents were sent to Africa

Information Dissemination- Annual Summary

TRACKING OF KEY PUBLICATIONS

CHART 1.
(Oct.2003- Sep.2004)

	HIV / AIDS & Nutrition	Prevention of Mother-to-Child HIV in Africa	Issues in Postabortion Care	Health Sector HR Crisis in Africa	HIV/AIDS Multisectoral Compendium	RH CD ROM/ RH Briefs
Total Disseminated	380	150	1131	110	477	6/ 39
Copies Requested (% of Total)	61%	63%	72%	65%	54%	100%/ 80%
# of Requests	41	21	22	17	52	1/ 5
# of African Countries Reached	18	12	8	8	6	0/ 2
# of Requests for 20 Copies or More	5	3	11	3	6	0/ 1
# of Downloads from sara.aed.org	691	1,382	308	N/A	1,879	N/A
Language Version Downloadable on	Eng/Fre 10+ Sites	Eng/Fre 4 Sites	Eng/Fre 2 Sites	Eng 3 Sites	Eng 20+ Sites	Eng/Fre N/A

S t a t i s t i c s

S A R A

Information Dissemination- Annual Summary

CHART 2. (Oct.2003- Sep.2004)		TRACKING OF KEY PUBLICATIONS						
A f r i c a O t h e r	Total Disseminated	380	150	1131	110	477	6/ 39	
	African Organizations	12	5	5	3	0	0/0	
	University Training Schools	2	1	0	0	0	0/0	
	Ministry	1	0	0	0	0	0/0	
	USAID/ AFR	2	4	1	2	3	0/ 1	
	Donors/ CAs/ AFR	0	0	1	1	0	0/ 1	
	USAID/ WDC	2	2	0	1	1	0/ 05	
	Donors/ CAs/ Non- AFR	12	7	8	3	11	0/ 0	
	Universities/ Non- AFR	2	1	0	1	1	0/ 0	
	Conferences/ Workshops/ Non- AFR	4	5	0	3	6	0/ 1	
	Other Individuals & Agencies	3	5	2	1	6	1/ 2	

S A R A * A large percentage of the documents listed in the "Other" categories are actually designed for use in Africa via conferences, workshops, and travelers who agree to take large quantities of documents for distribution purposes.

IV. Activities in AFR/SD-SARA Analytic Areas

A. *Child Survival (SO 19)*

SARA Advisors:

Suzanne Prysor-Jones, Project Director, AED

Martita Marx, Senior Child Survival Advisor, AED

Renuka Bery, Dissemination and Advocacy Manager, AED

SARA activities support the following AFR/SD intermediate results for improving child health:

- IR 1: Approaches developed to scale-up IMCI, especially through community approaches
- IR 2: Approaches developed to integrate quality improvement/problem-solving approaches into national systems for child health
- IR 3: Increased African capacity at regional, subregional, and national levels to provide technical assistance for child health, especially at the community level
- IR 4: Approaches developed to improve preservice training for child health at facility, community, and home-care levels
- IR 5: Approaches developed for improving the availability at community level of critical supplies for child and maternal health

Technical Support to AFR/SD Child Survival Team

Again this year, meetings of the child survival core group usually took place around specific technical tasks. Many of these meetings focused on preparing and discussing the Taking Stock of Child Survival in Africa task, the conclusions of which were presented at the SOTA course in June 2004. Reflecting AFR/SD interest in engaging private providers in child health and malaria, SARA staff pushed forward this year on organizing a steering committee meeting to prepare the Global Forum, slated to take place in February 2005. SARA staff also took the lead in preparing and carrying out the AFR/SD review of its multiyear grants to WHO/AFRO in several technical areas (see Crosscutting Issues section).

SARA child survival staff represented AFR/SD this year at the community IMCI Interagency Working Group meeting in New York, the IMCI Francophone Focal Points meeting in Ouagadougou, and the WHO/HQ working group on priorities for community child health in Geneva.

Issues Identification

Issues Identified from the “Child Survival: Taking Stock” Analysis

Several technical issues that should be considered for AFR/SD attention emerged from the program reviews and interviews carried out during the Taking Stock exercise. These include development and/or dissemination of best practices to:

- ◆ Improve on current investments in training through rationalizing in-service training, developing continuing education schemes, and developing more strategic approaches to improving preservice training;
- ◆ Promote successful, scaled-up strategies for supportive supervision and innovative, low-cost, quality improvement approaches;
- ◆ Find effective, non-remunerative ways of motivating the health force;
- ◆ Improve the delivery of child health services by private providers; and
- ◆ Assist governments to play a greater stewardship role and to manage functional private-private partnerships.

Advocacy for child health at all levels was also identified as a priority issue for AFR/SD support.

Analysis

Taking Stock of USAID Investments in Child Survival

Martita Marx, the team leader for the Taking Stock activity, and Carmen Coles, an AED staff consultant, worked on this AFR/SD priority activity for much of the year, with assistance from Suzanne Pryor-Jones, Renuka Bery, and the SARA publications team. The conclusions and recommendations presented in mid-2004 were based on:

- ◆ 36 key informant interviews;
- ◆ USAID/Mission reporting on implementation of *The Lancet* priority child survival interventions (from 17 Missions);
- ◆ Child survival funding trend analysis from 25 countries (assisted by consultant Nancy McKay); and
- ◆ Analysis of child health indicators and intervention coverage from 20 countries, based on DHS data.

By the second quarter of FY 2004, interviews had been conducted with health officers in 13 countries and with 23 key informants in the U.S. The interviews were transcribed and summaries were drafted for verification by informants and inclusion in the final Taking Stock report. Data from 17 USAID Missions on the extent of implementation of the child survival interventions categorized in *The Lancet* were received and entered into a database, although the data were of variable quality.

SARA presented the preliminary data twice—to AFR/SD and to AFR/SD and Bureau for Global Health representatives. Comments and recommendations from these meetings guided the final document.

A short draft overview of findings and recommendations was prepared for presentation to the Health Officers SOTA course in July 2004. The paper was well received and generated considerable interest. The recommendations were grouped into five main areas:

- ◆ Programming approaches correlated with child mortality reduction;
- ◆ Effective operational partnerships;
- ◆ Approaches to address critical challenges in human resources for health;
- ◆ USAID advocacy for child health; and
- ◆ Changes in USAID policy, programming, and management required to increase impact on child health.

The full report was finalized in September 2004 and includes analyses of:

- ◆ Child-related mortality indicators and trends;
- ◆ Intervention coverage and trends;
- ◆ Country data profiles;
- ◆ USAID programming;
- ◆ Role of governments;
- ◆ Role of donor partners; and
- ◆ Funding trends for child survival.

The recommendations on child survival programming approaches and USAID policies and management are included in the main document.

There have been several indications that the discussion and dissemination of this comprehensive review have already affected the discourse on child health within the USAID child survival community.

Packaging and Use of Health Care-Seeking Behavior Data

Elisabeth Sommerfelt, a SARA consultant, in close collaboration with Suzanne Pryor-Jones, carried out some in-depth analysis of survey data from the Demographic and Health Surveys Program (DHS) to broadly examine the use of the private sector for the care of children under five across a number of countries. SARA has coordinated with the World Bank on this activity, which highlights differences between economic quintiles. The analyses have been integrated into a World Bank document on issues with working with the private sector, drafted by Tonia Marek.

Data from several sources show that, for children under five, caretakers seek care from private sector sources to a much greater extent than is reflected in current investments in child health and malaria. A large percentage of caretakers seek no care outside the home. When they do go for care, those who do not go to the public sector go to drug sellers or shops, private pharmacies, private clinics or doctors, or

traditional healers. The pattern varies considerably across countries and within countries, but some overall patterns can be discerned:

- ◆ Large proportions of caretakers do not seek care at all outside the home for sick children (e.g., with fever: 40% in Uganda, 53% in Rwanda, and 78% in Ethiopia; or with diarrhea: 62% in Benin and 55% in Malawi).
- ◆ Shops are a significant source of care, especially in Malawi (over 25%), Uganda (over 20%), Zimbabwe (over 10%), Zambia (over 10% in urban settings), and rural Kenya (over 10%).
- ◆ In a significant percentage of cases, caretakers give care through drugs purchased from pharmacies or shops without a prescription (e.g., for fever: 39.7% in Malawi, approximately 35% in Uganda, 11.8% in Rwanda, 10.4% in Zimbabwe, and 5.3% in Ethiopia).
- ◆ Traditional healers are apparently less used overall for childhood illness, with large variations between countries and for different local categories of illness (e.g., for fever: 2% in Zambia, 5% in Kenya, 1.2% in Ethiopia, 1.4% in Rwanda, and 0.7% in Malawi; for rapid breathing: approximately 4-9% found in two districts in Senegal).
- ◆ The use of private health facilities or private doctors in most countries is much higher in urban areas than in rural. This is clearly the case in Kenya (over 15% rural and over 25% urban), Benin (over 10% rural and over 15% urban), Malawi (over 5% rural and over 10% urban), and Zambia (less than 5% rural and over 10% urban).
- ◆ Analysis of care-seeking by economic quintiles shows much higher use of private clinics and doctors by the highest quintile (Benin, Kenya, Malawi, Zambia, and Zimbabwe). The highest quintiles also use private pharmacies to a greater extent (Rwanda). However, the use of shops seems to be fairly steady over the different quintiles in most cases, and is sometimes higher in lower quintiles (Kenya).
- ◆ Comparing urban and rural settings, the use of private pharmacies is also often considerably higher in urban areas, especially in Kenya, Rwanda, Zambia, and Zimbabwe.
- ◆ In some countries, the overall use of private sector sources of care has increased during the 1990s (e.g., in Malawi from about 30% of care in 1992 to nearly 40% in 2000). Recourse to the public sector declined more than 15% over this period.
- ◆ In other countries (e.g., Mali), use of the private sector seems to have declined over the 1995-2000 time period, largely due to lower percentages using private pharmacies and traditional healers and, overall, much lower levels of care-seeking outside of the home (approximately 60% sought care outside the home in 1995, and only 45% in 2000).

Formative Analysis on Household Practices for Neonatal Care

WHO/AFRO found the opportunity this year to revive the idea of conducting formative analysis/community and household assessments of practices relevant to childbirth and newborns. The Family and Reproductive Health Division at WHO/

AFRO submitted a proposal to USAID that had been written jointly with the SARA project two years earlier. Nancy Nachbar, a SARA consultant, and SARA Reproductive Health Advisor Holley Stewart met with WHO/AFRO and USAID staff during the AFRO RH Program Managers meeting in South Africa to update the proposal. Maternal health issues have been given more prominence, as have tool development and capacity building to help other countries use the tool to inform community-based BCC strategies and interventions. USAID Bureaus for Global Health and Africa are co-funding AFRO to carry out the analysis/assessments in two to four countries in 2005. SARA staff will continue to assist WHO/AFRO with implementation, including organizing an interagency Technical Advisory Committee that will oversee the initiative.

Dissemination and Advocacy

Interagency Initiative on Child Health and the Private Sector

The USAID Bureau for Global Health, Office of Infectious Diseases, followed up on last year's Consultative Meeting on Child Health and the Private Sector, which was organized jointly at AED by the World Bank, WHO/HQ, and the SARA project, by providing some funding for SARA to organize a Global Forum on improving child health and malaria through greater involvement of the private sector, especially private providers.

The idea of holding the Global Forum in Africa, possibly in Uganda, was well received, and a steering committee was formed to manage the process. SARA engaged the Malaria Consortium to assist in forming the Steering Committee meeting and to organize the Forum.

Suzanne Prysor-Jones, Sylvia Meek from the Malaria Consortium, and Caroline Jones from the London School of Hygiene and Tropical Medicine (LSHTM) met early in the year to develop preliminary agendas for the Steering Committee Meeting and for the Forum. These drafts were shared and discussed with the main partners.

Specific objectives of the Global Forum are to:

- ◆ Discuss experiences and results to date from interventions to involve the private sector in various health initiatives (child health, malaria, TB, FP, etc.);
- ◆ Identify promising approaches and useful tools;
- ◆ Identify gaps in knowledge that currently hinder progress; and
- ◆ Determine the way forward at the international, regional, and country levels.

Working with the initial sponsoring partners (WHO, the World Bank, and USAID), Suzanne Prysor-Jones convened a Steering Committee meeting to:

- ◆ Discuss the objectives of the Forum;
- ◆ Review preparatory technical work being done;
- ◆ Develop a preliminary agenda and participants list;

- ◆ Determine the site and date of the Forum; and
- ◆ Give guidance on organizational and budgetary aspects of the Forum.

Sylvia Meek and her assistant organized the Steering Committee meeting, which was held at LSHTM in early April 2004. The meeting was attended by representatives of USAID/GH/ID, the World Bank, WHO/CAH, LSHTM, Ministry of Health/Uganda, the Malaria Consortium, JHU/HCP, BASICS, Management Sciences for Health's Strategies for Enhancing Access to Medicines program (MSH/SEAM), and SARA. Absent were WHO/AFRO, DFID, and the Swedish International Development Cooperation Agency.

Dr. Prysor-Jones facilitated the meeting, leading discussions on:

- ◆ Objectives of the Forum and expectations of the different organizations;
- ◆ Agenda for the Forum;
- ◆ Presentations and presenters for the Forum; and
- ◆ Venue, timing, types of participants, and funding.

Salient conclusions were that:

- ◆ The Forum should be held in February 2005 in Uganda;
- ◆ Approximately 75 participants should attend, half from developing countries;
- ◆ 10 countries should be chosen from a priority country list, developed at the meeting; and
- ◆ The private sector should be well represented in presentations, panels, etc.

Dr. Prysor-Jones worked with the Malaria Consortium to draft a new agenda that reflects the main decisions made during the steering committee meeting. The challenge is now to get the countries to invite and confirm the presenters, finalize their presentations, find sponsorship for country participants, and work with the partners to ensure appropriate participation from all concerned.

The Malaria Consortium team in Uganda has booked a venue just outside Kampala for February 8-11, 2005.

Facilitators Briefing Package for Community IMCI

WHO/AFRO printed up the finalized Briefing Package this year. SARA had contributed substantially at various stages of its development.

The package has now been used by WHO/AFRO and its partners to orient 129 facilitators from 30 countries in Anglophone and Francophone Africa.

Advocacy for the Reduction of Neonatal Mortality

SARA staff have assisted the AED REDUCE/ALIVE team this year, resulting in funds becoming available from various sources (World Bank, WHO/AFRO, AWARE-RH) for four country activities this year in Ethiopia, Ghana, Mali, and Uganda. All of these have a larger focus on newborns than previous REDUCE ap-

plications. World Bank funds in Ethiopia and Mali have also allowed REDUCE/ALIVE advocacy activities to be taken to district level. AWARE-RH has included two REDUCE/ALIVE applications in its budget for next year. AWARE-RH will also carry out monitoring activities for countries in West Africa that have already implemented the advocacy model. This should help to identify opportunities to revitalize advocacy, where needed, and to include the newborn issues where they are lacking.

SARA is hoping to join with the AWARE-RH and ACCESS projects to advocate for attention to newborns, which includes promoting best practices in West Africa. These projects are still new and have not yet determined the way forward on this.

Support for Maternal and Newborn Interagency Partnerships

Suzanne Prysor-Jones attended the Healthy Newborn Partnership meeting in Addis Ababa, Ethiopia in February 2004, where she facilitated a working session on advocacy for newborn health. She was then asked to be part of the newly constituted Safe Motherhood and Newborn Health Partnership (SMNHP) Task Force on Advocacy, which met in London in May 2004. SMNHP's advocacy activities are being integrated with those of the Healthy Newborn Partnership, in order to consolidate efforts and avoid duplication. The objectives of the meeting were to plan an advocacy strategy and, as part of this, to discuss the Global Consultation for maternal, neonatal, and child health being proposed for 2005.

Dr. Prysor-Jones gave a short presentation on systematic advocacy strategy development as part of the introductory session, stressing the need to define advocacy objectives first before jumping into detailed advocacy messages. Dr. Prysor-Jones also emphasized the importance of defining the SMNHP niche in global-level advocacy, so that it encourages/supports partners (e.g., WHO/AFRO) to carry out advocacy at regional and country levels, rather than trying to "do it all" itself.

It was agreed that the Global Consultation should be linked to World Health Day in April 2005 and be held in New Delhi, India. Dr. Prysor-Jones, with Dr. Oluwole from WHO/AFRO, stressed the importance of having regional meetings before the global event, to stimulate activities at regional and country level, and thus have more chance for ownership and follow-up afterwards.

Development of Toolkit on Working with Private Providers for Child Health and Malaria

The Toolkit, which SARA is developing in close collaboration with WHO/CAH and HCP, is currently being reviewed by CAH and by AFR/SD. More than 65 tools and papers have so far been collected for the searchable CD-ROM, which will be attached to the printed overview paper. An annotated bibliography of the tools and papers has also been developed and will be included in the CD-ROM. The package should be finalized in early 2005.

Participation in WHO/HQ/CAH Consultative Group on Community Child Health

Suzanne Prysor-Jones participated in the WHO Informal Consultation on Family and Community Practices that Improve Child Survival, Growth and Development, held in Geneva in March 2004. Plenary sessions of this small meeting discussed the need to add the review of birth spacing and neonatal care to the discourse on key practices for improving child health in the community. It was noted that current frameworks for promoting child health do not currently, but should, include care needed for child development, newborn care, and HIV/AIDS-related interventions for children.

Dr. Prysor-Jones facilitated the working group session on moving the family and community practices agenda forward within WHO/CAH. The discussion focused on the most appropriate role for WHO/CAH in improving the implementation process for child health in the community, and on defining priority areas for research. The working group identified the following implementation areas where CAH could play an important role:

At a global level:

- ◆ Help ensure funding and continued investment in improving child health in the community;
- ◆ Synthesize program approaches and lessons learned, and ensure information is shared at global and country levels;
- ◆ Review different NGO networking models and provide best practice guidelines for strengthening networks; and
- ◆ Provide guidelines on the minimum capacity required for implementing community IMCI interventions at country and district levels, and develop a systematic process for capacity building.

At country level:

- ◆ Promote the use of the WHO briefing package to guide the planning and coordination of community child health activities, build partnerships, etc.;
- ◆ Ensure that capacity is built and that the briefing package is widely circulated and used;
- ◆ Produce guidelines to assist countries to select and prioritize key practices, combining recommendations on a core set of practices for different scenarios with a process to facilitate making the list context-specific;
- ◆ Help countries develop strategies to involve private providers in community IMCI; and
- ◆ Develop and/or streamline the tools needed for community IMCI (e.g., formative research tools that help with intervention design).

Capacity Building and Collaboration with African Institutions

WHO/AFRO

Martita Marx attended the IMCI Focal Points meeting held in July 2004 in Ouagadougou, Burkina Faso. She noted that the technical updates were excellent. The meeting emphasized the need for partnering to reach the Millennium Development Goals. There was good support for experimentation and evaluation of alternative approaches for training and follow-up. Discussions with country representatives and WHO staff highlighted the potential for fruitful partnerships with USAID, particularly in DR Congo, Ethiopia, Guinea, Madagascar, Mozambique, and Tanzania.

An update was presented on the implementation of IMCI in the Africa region. Of the 20 Anglophone countries:

- ◆ IMCI is part of the national strategy in 18 countries
- ◆ 14 countries are implementing IMCI in more than 11 districts
- ◆ 5 countries have done training in breastfeeding counseling and HIV and infant feeding counseling
- ◆ More than 70 percent of health workers have been trained (in IMCI) in 10 countries, and 40 percent in 2 more
- ◆ 12 countries have integrated IMCI into training in some preservice schools
- ◆ 12 countries have IMCI in more than 9 of their district development plans
- ◆ 11 countries have working groups on community child health/community IMCI (with 4 more in progress)
- ◆ 12 countries have done baseline situation analyses at national level, and 9 at district levels
- ◆ Only 4 countries have a communication strategy for child health
- ◆ 7 countries have community IMCI plans in more than 5 districts.

Implementation in Francophone Africa is less advanced. Of the 23 Francophone countries:

- ◆ IMCI is part of the national strategy in 12 countries
- ◆ 5 countries are implementing IMCI in more than 11 districts
- ◆ 6 countries have done training in breastfeeding counseling and 7 countries have some professionals trained in HIV and infant feeding counseling
- ◆ More than 70 percent of health workers have been trained (in IMCI) in 6 countries, and 50 percent in one more
- ◆ 5 countries have integrated IMCI into training in some preservice schools
- ◆ 7 countries have IMCI in more than 9 of their district development plans
- ◆ 9 countries have working groups on community child health/community IMCI
- ◆ 11 countries have done baseline situation analyses at national level, and 4 at district levels
- ◆ Only 4 countries have a communication strategy for child health
- ◆ 3 countries have community IMCI plans in more than 5 districts.

WHO/AFRO requested that SARA make a presentation on private providers at the Joint IMCI/RBM Task Force meeting in Maputo in September 2004. Since Suzanne Prysor-Jones had made a generic presentation at last year's meeting, she worked with George Greer (BASICS/AED) to craft a presentation based on the review of the role of medicine vendors in malaria treatment, which BASICS carried out and discussed at a regional meeting in Accra in February 2004. John Paul Clark from AFR/SD kindly made this presentation in Maputo, since Dr. Prysor-Jones was unable to attend the meeting.

Other issues discussed with WHO/AFRO this year have included the development of management modules to orient country child health/IMCI managers. Dr. Prysor-Jones contacted potential consultants for WHO/AFRO to recruit to carry out this task. The need for management training had been discussed with WHO/AFRO in previous years, since only technical training (in IMCI, HIV and infant feeding counseling, and breast feeding counseling) has been promoted by WHO/AFRO in recent years.

Illustrative Results

- ◆ Conclusions and recommendations of the Taking Stock of Child Survival in Africa task presented and discussed by AFR/SD at the 2004 Health Officers SOTA course.
- ◆ Issue of private providers included in WHO/AFRO 2004 Joint IMCI and Malaria Task Force, with request for SARA to make a presentation.
- ◆ Steering Committee for Private Sector Forum presentation convened by SARA on behalf of USAID, WHO/HQ, and the World Bank.
- ◆ SARA analysis of care-seeking behavior for child health by economic quintiles used in World Bank report.
- ◆ AFR/SD priority issues for the implementation of community child health (engaging private providers, strengthening networking of NGOs, more attention on newborns), included in the international consultation recommendations for WHO/CAH Division work program development.

B. *Infectious Diseases (SO 19)*

Technical Area: Malaria

SARA Advisors:

Dr. Sambe Duale, Senior Analysis Manager, Tulane University
Antonia Wolff, Dissemination Specialist, AED

SARA activities support the following AFR/SD intermediate results for malaria:

- IR 2: Improving the enabling environment to design, manage, and evaluate malaria control programs
- IR 3: Improving policies, strategies, and approaches to control malaria for child survival and maternal health

Technical Support to AFR/SD for Malaria Activities

Production of a Report on USAID Malaria Programs in Africa

The SARA and PHNI projects worked together to prepare a report on USAID investments and programming approaches for malaria prevention and control in Africa. The draft of the report was circulated to USAID missions for review and comments and was then produced and disseminated this year. Antonia Wolff, SARA dissemination specialist, collaborated with AFR/SD, PHNIP, WHO/AFRO, and WHO/HQ to disseminate the report strategically.

Issues Identification

Integrated Vector Management for Malaria Control

SARA staff worked with WHO/AFRO and EHP project colleagues to plan the 2nd IVM Partnership Meeting held April 22-23, 2004, in Douala, Cameroon. SARA arranged for representatives from African regional partner institutions from West Africa (e.g., Institut de Recherche en Science de la Santé in Bobo Dioulasso, Burkina Faso and Malaria Research and Training Center in Bamako, Mali) to participate in the meeting.

IVM provides an option to improve vector control in endemic countries, and sustain the attainment of the longer-term target to reduce the use of persistent organic pollutants pesticides for vector control. The Vector Control Needs Assessment provides a sound basis for countries to develop realistic national plans on IVM. The 2nd IVM partnership meeting focused primarily on addressing country priority activities in 2004 and mechanisms for support by partner organizations. SARA will continue its technical collaboration with African partner institutions on promoting IVM.

Dissemination and Advocacy

Support for Initiatives to Prevent Malaria in Pregnancy in Africa

RBM-MIPWG

SARA staff has continued to be actively involved in advocacy and dissemination activities with Roll Back Malaria's Malaria in Pregnancy Working Group (RBM-MPWG) and African networks in support of improved policies and programs to prevent and manage malaria during pregnancy. The RBM-MPWG tasked PATH and SARA to lead its subworking group on MIP advocacy.

MIPESA

SARA provided technical support and background materials to PATH for an advocacy workshop for interested parties involved in MIPESA. The MIPESA advocacy workshop took place in January 2004 in Kampala, Uganda.

RAOPAG

SARA Reproductive Health Advisor Holley Stewart represented SARA at a meeting held October 9-10, 2003, in Cotonou, Benin, to launch the malaria and pregnancy network for West Africa (RAOPAG). SARA staff facilitated discussions between Dr. Dorothee Kinde-Gazard, RAOPAG coordinator, the AWARE-RH Project, WHO/AFRO, and other interested parties on ways to support and move the MIP network activities forward in West Africa.

ECSA Health Community Secretariat (formerly CRHCS)

ECSA Health Community Secretariat completed the review of policies and program guidelines on preventing and managing malaria during pregnancy in ECSA countries, jointly-funded by SARA and REDSO/ESA. The review findings were presented at the ECSA-sponsored Directors' Joint Consultative Committee (DJCC) meeting held in July 2004 in Arusha. The DJCC recommended including MIP on the Health Ministers Conference agenda.

MIP Brochure

Over 5,000 copies of an updated MIP brochure were produced and disseminated in English and French throughout Africa.

Procurement and Dissemination of the AJTMH Supplement on the Burden of Malaria in Africa.

The Multilateral Initiative on Malaria (MIM) and the Disease Control Priorities in Developing Countries project sponsored a workshop titled "The Intolerable Burden of Malaria: What's New, What's Needed" during the 3rd MIM Pan-African Conference on Malaria held November 2002 in Arusha, Tanzania. Dr. Duale attended the

MIM conference. The workshop reviewed current approaches for determining the economic toll taken by malaria and proposed a research agenda for defining the burden more accurately. This workshop examined the costly role of epidemics, other forms of social and economic burdens due to malaria, and the cost-effectiveness of newer control methods.

In 2004, the National Institutes of Health's Fogarty International Center sponsored the publication of a supplement to the *American Journal of Tropical Medicine and Hygiene*. The supplement contained the presentations and outcomes of the above mentioned workshop. The SARA project purchased and disseminated copies of the supplement to health professionals and partner institutions in Africa.

RBM Global Advocacy Meeting

Dr. Duale joined the USAID Team at the RBM partnership Global Advocacy Meeting held in September 2004, hosted by the World Bank and organized by the RBM Partnership Secretariat. The meeting discussions aimed to help establish an advocacy task force or other mechanism to lead and support global advocacy on behalf of the partnership. The meeting resulted in a defined vision and guiding principles for RBM Partnership in global advocacy, and a framework for a global advocacy plan. SARA will contribute, as appropriate, to develop further and implement the RBM Global Advocacy Plan.

Support to the Design of Advocacy Materials on Taxes and Tariffs on ITNs

The NetMark project is developing an advocacy package to help reduce taxes and tariffs for insecticide-treated nets (ITNs). Dr. Suzanne Prysor-Jones worked with NetMark staff and consultants to shape the taxes and tariffs advocacy presentation. She also assisted NetMark in developing an advocacy strategy within which this model could be used. Dr. Duale also provided some technical inputs to the process.

Capacity Building and Collaboration with African Institutions

ECSA Health Community Secretariat

SARA provided technical and financial support to ECSA to review national policies and guidelines on preventing and controlling MIP in the subregion. A consultant undertook the review in selected countries and prepared a report that will be used to advocate for improved programs to prevent MIP. The findings of the review were presented to the DJCC. ECSA will use the findings to design advocacy and technical support activities to assist countries in moving the MIP agenda forward.

WAHO

WAHO staff sought technical support from SARA to develop a malaria program and activities. SARA facilitated contact and an ongoing dialogue between WAHO

Infectious Diseases (Malaria)

and the NetMark project. They are currently developing joint advocacy activities on ITNs in West Africa.

Dr. Duale provided technical input for the planning of the WAHO and RBM/WARN-sponsored workshop held June 2004, in Ouagadougou, Burkina Faso. The purpose of the workshop was to bring national malaria control managers from ECOWAS member countries together to review progress and constraints to achieving the Abuja RBM goals.

The CORE Malaria Working Group

SARA continued its active involvement with the CORE Malaria Working Group activities this year. SARA staff reviewed the 2004 CORE malaria work plan and Dr. Duale provided support for developing the technical agenda and identifying potential speakers for the CORE national malaria conferences in Ghana and Sierra Leone. During a February 2004 visit to Accra, Ghana, Dr. Duale met with Iyeme Efem, the country director of Project Concern International, to discuss the CORE national malaria conference plans. The conference was held successfully in March 2004.

Technical Area: Tuberculosis**SARA Advisors**

Dr. Sambe Duale, Senior Analysis Manager, Tulane University
Renuka Bery, Dissemination and Advocacy Manager, AED
Antonia Wolff, Dissemination Specialist, AED

SARA activities support the following AFR/SD intermediate results for tuberculosis:

- IR 2: Improving the enabling environment to design, manage, and evaluate TB control programs
- IR 3: Improving policies, strategies, and approaches for the prevention and control of TB and other infectious diseases

Dissemination and Advocacy***TB and Gender Study Final Report***

SARA staff worked with the principal investigators and reviewers to complete the final editing of the report. It was then submitted to USAID for review and approval for publication. The report will be produced and disseminated in collaboration with ECSA as part of its advocacy and technical assistance efforts to member countries to raise the profile of gender issues on country health agendas. The study findings were presented at ECSA's Directors Joint Consultative Committee (DJCC). The principal investigators plan to submit a paper, based on the study findings, for publication in a peer-reviewed journal.

Capacity Building and Collaboration with African Institutions***Technical Support to ECSA for Documenting Innovative TB-HIV-linked Programs***

Dr. Sambe Duale participated in electronic consultations with ECSA and its technical partners (the Royal Netherlands TB Association, WHO/HQ, WHO/AFRO, REDSO/ESA, and SARA) on planning the documentation of innovative TB-HIV-linked program interventions in selected ESCA countries. During a visit to Harare, Dr. Duale met with colleagues from the WHO/AFRO Division of Communicable Disease and Prevention and Control's (DDC) Tuberculosis Unit to discuss how the unit can coordinate activities with ECSA and SARA to document best practices in implementing TB-HIV/AIDS collaborative activities. ECSA will organize a small expert working group meeting to develop a protocol and tools, and will also hire two consultants to conduct the exercise. Implementing this documentation exercise has been delayed due to an ECSA staff change and the difficulty in identifying a consultant with TB expertise. SARA plans continued technical assistance to ECSA for this activity.

Technical Area: Integrated Disease Surveillance and Response

SARA Advisors

Dr. Sambe Duale, Senior Analysis Manager, Tulane University
Antonia Wolff, Dissemination Specialist, AED

SARA activities support the following AFR/SD intermediate results for IDSR:

- IR 2: Improving the enabling environment to design, manage, and evaluate disease surveillance and response systems
- IR 3: Improving policies, strategies, and approaches for integrated disease surveillance and response

Technical support to AFR/SD for IDSR Activities

Support for Joint Partners' Information Exchange on Programming IDSR Activities

Dr. Duale and Ms. Wolff continued to work closely with AFR/SD to facilitate the coordination of IDSR activities with other partners, especially with WHO and CDC. During the year, SARA facilitated conference calls, electronic exchanges, and face-to-face meetings involving AFR/SD and its partners on IDSR implementation in Africa.

Cable on Cholera Epidemic Preparedness and Response

Dr. Duale led a coordinated effort of AFR/SD with other USAID bureaus, CDC, and WHO to prepare a cable to provide missions with the information and guidance necessary for their involvement in cholera epidemic preparedness and response activities. The final cable on cholera prevention and control was sent out by the State Department to all missions in Africa. AFR/SD received good feedback on the cable from missions in Angola, Mozambique, Togo, and Zimbabwe.

Analysis

Final Evaluation of the UNF-funded IDSR Project in Africa

Dr. Duale worked with colleagues from WHO and CDC to develop a protocol and tools for the final evaluation of a project on strengthening surveillance and control of vaccine-preventable and epidemic-prone diseases, supported by the United Nations Fund for International Partnerships consortium (composed of UNF and the Rockefeller and Gates Foundations). The project was implemented from May 2000 to February 2004 in Burkina Faso, Ghana, Guinea, Mali, and Sudan. The main objective of the evaluation (being carried out in October 2004), is to document any changes that have occurred in the surveillance system of beneficiary countries that can be attributed to this project.

Dissemination and Advocacy

Dissemination of Findings of the IDSR Documentation

SARA continued to disseminate the packet of policy briefs on IDSR implementation in Africa. The IDSR briefs were among the background materials distributed at the following meetings: the Global Consultation on Strengthening National Capacities for Surveillance Response and Control of Communicable Diseases, October 2003, in Geneva; the CDC-hosted Technical Consultation on IDSR Indicators, March 2004, in Atlanta; the USAID SOTA Course for its HPN staff in Africa, June 2004, in Johannesburg, South Africa; and the 5th IDSR Task Force meeting, June 2004, in Harare, Zimbabwe. At the Global Consultation on Strengthening National Capacities for Surveillance Response and Control of Communicable Diseases, Antonia Wolff presented SARA's support to WHO/AFRO and its partners for documenting and disseminating lessons learned so far in implementing the IDSR strategy.

Capacity Building and Collaboration with African Institutions

WHO/AFRO

Dissemination and Advocacy Support

In November 2003, Antonia Wolff traveled to WHO/AFRO in Harare, Zimbabwe to provide technical guidance and strategic thinking around dissemination issues for a new dissemination officer, Zora Machekanyanga, with the goal to strengthen the WHO/AFRO/Vaccine Preventable Diseases unit's abilities to design, produce, and disseminate key materials. While there, Ms. Wolff worked closely with Grace Kagondou, the Expanded Programme on Immunization communications coordinator, and Ms. Machekanyanga to assist the VPD staff in prioritizing their communication and dissemination needs. Ms. Machekanyanga and Ms. Wolff worked with VPD staff technical advisors to finalize a draft communication strategy.

5th Integrated Disease Surveillance and Response Task Force

Dr. Duale attended the 5th IDSR Task Force meeting held June 2004, in Harare, Zimbabwe. SARA continued to be one of the key WHO/AFRO technical partners supporting IDSR implementation in African countries. WHO/AFRO expects SARA to play a critical role in implementing the following activities in support of IDSR next year:

- ◆ Formulate a regional advocacy and marketing plan for IDSR in the Africa region;
- ◆ Develop a comprehensive regional strategy for support to epidemic preparedness and response (e.g., setting up a rapid response network, securing and deploying contingency stocks of reagents, drugs, vaccines and equipment, creating communication channels, etc.); and

- ◆ Develop terms of reference and conduct documentation and evaluation of IDSR in selected countries.

Technical Review of the Monitoring and Evaluation Protocol and Data Base

Dr. Duale was also invited to attend a Technical Review Meeting on the Monitoring and Evaluation Protocol and Global Indicator Data Base for Communicable Disease Surveillance and Response, held at the WHO Headquarters in Geneva in July 2004. Over the last few years, WHO has developed a framework to support its member states in building capacity for surveillance and response through assessing surveillance systems; providing standards, guidelines, and tools for implementation; building laboratory capacity; and supporting training in field epidemiology and monitoring and evaluation. The technical review meeting on the draft monitoring and evaluation protocol and the indicators for the global database was convened to ensure that perspectives from partners, regions, countries, and other stakeholders are considered, thus ensuring that these guidelines and tools are appropriate and relevant to the main users. Participants at the meeting provided a number of comments and guidance to WHO on improving the contents and structure of the guidelines.

C. Nutrition (SO 19)

SARA Advisors:

Dr. Ellen Piwoz, Nutrition Advisor, AED

Dorcas Lwanga, Nutritionist, AED

Kinday Samba, Nutritionist, AED

Renuka Bery, Dissemination and Advocacy Manager, AED

SARA activities support the following AFR/SD intermediate results for improving nutrition programs and policies:

- IR 1: Increased African commitment to addressing nutrition-related problems
- IR 2: Strengthened African regional and national capacity to plan, manage, implement, and evaluate nutrition-related policies and programs
- IR 3: Increased number and quality of nutrition-related activities integrated into USAID bilateral and regional programs
- IR 4: Increased joint planning and programming with USAID partners and other donors on nutrition-related activities
- IR 5: Developed, evaluated, and disseminated existing and new approaches to improve nutrition-related behaviors and practices at the population level

Technical Support to AFR/SD for Nutrition Activities

SARA continued to provide technical support to AFR/SD this year to manage the nutrition results package and to provide technical assistance on HIV-related issues. This support included:

Participating in Nutrition and HIV/AIDS Core Groups

SARA assisted AFR/SD to implement the priorities spelled out last year by the nutrition and HIV/AIDS core groups. These priorities were to conduct:

- ◆ Advocacy using PROFILES and other tools, and support to implement the Essential Nutrition Actions for child survival, prevention of mother-to-child transmission of HIV, and reproductive health within USAID and its missions;
- ◆ Analysis, information dissemination, and advocacy for child survival and prevention of mother-to-child transmission of HIV, with special emphasis on safe infant feeding for children born to HIV-positive mothers and locally produced and nutritionally appropriate and affordable foods for replacement feeding of children who stop breastfeeding early because of HIV;
- ◆ Analysis, information dissemination, advocacy, and capacity development for nutrition counseling, care, and support for people living with HIV/AIDS in Africa;
- ◆ Analysis related to pediatric HIV/AIDS in Africa.

Nutrition

The steps taken and activities implemented to address each of these issues are described throughout this section of the report.

Providing Continued Support to AFR/SD partners on Nutrition Issues

SARA provided continued technical support to AFR/SD partners on nutrition issues, some of which were related to HIV. SARA involvement included:

- ◆ Support to LINKAGES on formative analysis and technical updates on HIV and infant feeding/nutrition issues, including technical assistance in Ethiopia
- ◆ Support to FANTA to prepare guidelines, tools, and training materials on nutrition care and support for PLWHA
- ◆ Support to BASICS to develop capacity and disseminate tools and approaches for Essential Nutrition Actions among NGOs in West Africa
- ◆ Support to CDC/WHO to develop a generic training package for prevention of mother-to-child transmission of HIV (PMTCT) programs and to develop tools for counseling HIV-positive women about nutrition and infant feeding issues
- ◆ Participation in UNICEF interagency meetings on implementation of the Global Strategy for Infant and Young Child Feeding
- ◆ Participation in informal meetings with UNICEF/UN Regional Inter-Agency Coordination Support Office (RIACSO) for the Special Envoy for Humanitarian Needs in Southern Africa and the World Food Programme (WFP) to discuss nutrition, food security, and HIV in southern Africa.

Developing Advocacy Materials and Technical and Operational Guidelines on Nutrition and HIV/AIDS

SARA participated in several meetings at USAID to discuss nutrition, food security, and HIV/AIDS, which were convened by the Offices of HIV/AIDS, Health, Population and Nutrition, and Food for Peace. The purpose of the meetings was to discuss the role of nutrition and food aid in HIV/AIDS programming, in preparation for the May 11, 2004 Congressional Hearing on Hunger and HIV/AIDS in Africa, and to identify priorities for intervention under the newly formed President's Emergency Plan for AIDS Relief.

To further the agenda identified during these meetings, SARA prepared a brochure entitled *Nutrition and HIV/AIDS: Knowledge, Gaps, and Priority Actions*. The brochure was prepared with inputs from the FANTA project; it summarized the literature on these complex issues and identified intervention areas for future support. The primary target audience for the brochure was decision-makers working within the Office of the Global AIDS Coordinator (OGAC). However, the brochure has been widely disseminated on the Internet and at international meetings. It is currently available in both English and French. A PowerPoint presentation was developed to accompany the brochure and was used and/or adapted in several settings. It was presented to USAID/Washington staff, to HPN officers attending the Africa SOTA meeting in Johannesburg, and to program managers and policymakers in Ethiopia and West Africa.

In addition to preparing advocacy materials, SARA assisted AFR/SD in reviewing technical materials and preparing operational guidelines for integrating food and nutrition interventions into HIV prevention, treatment, and care programs. The technical materials included nutrition elements of the HIV/AIDS basic care package and summaries of the evidence on use of micronutrient supplements and HIV disease outcomes. The operational guidelines, requested by the OGAC, specify the interventions, entry and exit criteria for providing nutrition counseling, care, and support in HIV programs. These interventions include:

- ◆ Baseline and follow-up nutritional assessment, including anthropometry and dietary assessments in health-facility and community-based HIV/AIDS programs to identify nutritionally vulnerable adults and children living with HIV/AIDS;
- ◆ Therapeutic/supplementary feeding and related medical care to treat severe and moderate malnutrition in HIV-positive adults and children participating in HIV prevention (PMTCT), treatment, and care programs, including programs reaching orphans and vulnerable children;
- ◆ Nutrition education, counseling, and food-related support as part of a preventive care package to maintain body weight, to prevent food and waterborne infections, to manage dietary complications of HIV-related symptoms and secondary infections, to manage side effects from antiretroviral (ARV) therapy and other HIV medications, and to assure safe infant feeding practices in health facility, community, and home-based care programs;
- ◆ Micronutrient supplements for nutritionally vulnerable pregnant and lactating HIV-positive women.

Developing Draft Operational Guidelines on Use of Breast Milk Substitutes in HIV Programs

At the Africa Bureau's request, SARA Nutrition Advisor Dr. Ellen Piwoz drafted supplemental guidance for USAID on the use of breast milk substitutes in USAID-funded PMTCT programs. The purpose of the guidance was to inform missions about the elements of the USAID Breastfeeding Policy that relate to procuring breast milk substitutes, and to help them decide whether the use of breast milk substitutes would be appropriate in their programs. The guidance was reviewed internally by USAID and subsequently adapted for dissemination to the field.

Participating in USAID-sponsored Conference on Orphans and Vulnerable Children

The SARA nutrition team contributed to the AFR/SD-sponsored conference on orphans and vulnerable children, held November 2003 in Washington, DC, and attended by nearly 400 government and NGO participants. The SARA nutrition team reviewed and provided technical inputs into the State of the Science background document that was prepared for the meeting, and made presentations in two working group sessions. SARA Nutritionist Dorcas Lwanga presented on nutrition

Nutrition

for HIV-positive children, while Dr. Ellen Piwoz presented on HIV, infant feeding, and maternal health.

Participating in the USAID Africa SOTA Course

Dr. Piwoz participated in the USAID Africa SOTA Course this year, held in June 2004 in Johannesburg, South Africa. Dr. Piwoz and AFR/SD HIV/AIDS Advisor Peter Salama presented jointly on food, nutrition, and HIV/AIDS. This presentation, in a mini-university session on the first day, gave an overview of the deteriorating nutritional situation in Africa, summarized the evidence on nutrition and HIV/AIDS, discussed nutritional issues for people on antiretroviral therapy, provided new data on HIV and infant feeding, and discussed priority interventions and USAID programming issues. The slides for the presentation and accompanying notes are available on request and will be on the SOTA CD-ROM.

Participating in a Mission to Mozambique to Identify Opportunities to Integrate Food and Nutrition Interventions in HIV Prevention, Treatment and Care Programs

In August 2004, Dr. Piwoz traveled to Mozambique as a member of a USAID assessment team that included representatives from FANTA, USAID (Africa Bureau/Food for Peace/Southern Africa Regional Office/Mozambique Mission), and World Food Programme (WFP):

- ◆ Identify and justify integrating food and nutrition interventions within HIV prevention, treatment, and care programs and assist USAID/Mozambique to deliver a more effective package of services;
- ◆ Note areas where the synergies between USAID programs and key partners such as the WFP can be improved, and where the design and implementation of nutrition and food security and food aid interventions could assist in addressing the HIV/AIDS pandemic;
- ◆ Provide actionable recommendations to strengthen the USAID/Mozambique FY 2005 Country Operational Plan and the USAID/Mozambique five-year HIV/AIDS strategy; to link nutrition, food security, and HIV/AIDS programming; and improve the impact and ability of USAID programs to contribute to the President's Emergency Plan for AIDS Relief.

The assessment team focused on five programmatic areas: 1) PMTCT; 2) treatment of PLWHA; 3) home-based care; 4) care for OVC; and 5) food security and food aid. Dr. Piwoz drafted recommendations related to integrating food and nutrition interventions into PMTCT programs.

Issues Identification

Mother-to-Child Transmission of HIV (MTCT) and Infant Feeding

Bringing clarity to issues surrounding postnatal transmission of HIV, and appropriate strategies for improving HIV-free survival of children, has been an important

priority of the SARA project and AFR/SD. This year, attention was focused on recommendations for feeding of the non-breastfed child after six months using locally available foods. In March 2004, Dr. Ellen Piwoz participated in a WHO informal consultation to:

- ◆ Develop feeding recommendations for infants and young children 6-24 months of age who are not breastfed (to enable WHO to develop guidelines);
- ◆ Discuss program guidelines and tools for translating generic recommendations in locally appropriate feeding guidelines;
- ◆ Discuss sustainable options for increasing access to nutritious foods and/or micronutrients in resource-poor settings.

Following the meeting, WHO prepared guiding principles for feeding the non-breastfed child that paralleled similar principles for feeding of breastfed children aged 6-24 months. These guiding principles are being finalized and should be available in 2005. Dr. Piwoz assisted WHO by preparing a brief document titled *Summary statement on key issues around early breastfeeding cessation for infants and young children of HIV-positive mothers: Timing, care, and safe transition*. This document summarizes the main considerations for feeding HIV-exposed, non-breastfed children after 6 months; recommendations on timing of early breastfeeding cessation by HIV-positive mothers; care of non-breastfed children; making a safe transition to replacement feeding; and unresolved issues and knowledge gaps on this issue. The summary statement will be disseminated by WHO.

Pediatric HIV and Child Survival

Dr. Piwoz worked this year with Africa Bureau HIV/AIDS Advisor Dr. Peter Salama on a new priority issue: advocacy on the importance of pediatric HIV/AIDS to child survival in Africa. To examine this issue quantitatively and objectively, SARA used a recently published spreadsheet-based model developed by the LINKAGES project to predict HIV infections and non-HIV related deaths in rural and urban areas of 13 African countries. A paper will be prepared in collaboration with UNICEF on this issue next year.

Analysis

The ZVITAMBO Trial

Dr. Piwoz has continued to serve as a co-investigator on the ZVITAMBO infant feeding and counseling study. ZVITAMBO is a clinical trial to assess whether vitamin A, given within 96 hours of delivery to mothers and babies, can reduce infant mortality, HIV transmission through breastfeeding, and the incidence of HIV infection in postnatal women. In September 1999, ZVITAMBO began providing systematic counseling and support to all study mothers on HIV issues, including infant feeding counseling. The counseling intervention, which was partially funded by the LINKAGES project, includes monitoring and evaluation to determine its impact on

women's knowledge about MTCT, and their decisions related to HIV testing, disclosure, and infant feeding.

Dr. Piwoz traveled to Zimbabwe once this year, in December 2003, to work with the ZVITAMBO team to present the preliminary findings of the vitamin A trial and the infant feeding intervention to key stakeholders from the national government's Nutrition and PMTCT programs. She also obtained feedback on further national level dissemination strategies. The team also prepared an abstract for the International AIDS Conference. In July 2004, Peter Iliff presented on Dr. Piwoz's behalf at the conference in Bangkok, Thailand. The ZVITAMBO team submitted the manuscript on the increased risk of postnatal HIV transmission and transmission plus death associated with early non-exclusive breastfeeding, which is currently being revised based on reviewer comments and will be resubmitted in November 2004. One manuscript describing the infant feeding education and counseling intervention and its impact on breastfeeding and related behaviors is currently in press in the *Journal of Nutrition*. Oral presentations on the impact of the education and counseling intervention on HIV transmission and transmission-free survival were made this year at CDC, the Society for International Nutrition Research meeting, UNICEF, USAID, and the World Bank.

ZVITAMBO Principal Investigator Dr. Jean Humphrey visited Washington, DC, this year. During and following this visit, meetings were held within the Africa Bureau and with the ZVITAMBO study team to discuss priority issues where secondary data analyses could inform U.S. government policies and programs related to pediatric HIV/AIDS. Two analyses were identified: a comparison of growth patterns amongst HIV-infected and uninfected children, and analyses of morbidity and mortality in HIV-positive children. SARA entered into an agreement with ZVITAMBO to conduct these analyses in FY 2005.

Community Models of Nutrition Care and Support: The Community Therapeutic Care Study

Last year, through a series of informal consultative meetings, SARA worked with AFR/SD to identify different models of community-based nutrition care that could be extended to care for adults and children living with HIV/AIDS. One particular model, the approach known as Community Therapeutic Care (CTC), was identified for managing uncomplicated severe malnutrition in children as a promising practice for nutrition care and support of people living with HIV/AIDS.

CTC has been implemented in several African countries, most widely in rural Malawi. Evaluations of CTC, supported in part by USAID through the FANTA project, have shown that the approach effectively reaches large numbers of severely malnourished children; that it is effective for nutrition recovery; and that moving management of non-complicated severe malnutrition to the community may reduce relapse requiring repeat program entry and improve child survival.

During this year, SARA worked with FANTA and colleagues at Valid International, the UK-based NGO that is providing and evaluating the CTC approach in Malawi, to finalize a proposal and begin implementing a two-part study to evaluate the effectiveness of using CTC as an entry point for community-based care of adults and children living with HIV. The two parts of the study include:

- ◆ A qualitative study among CTC families, community leaders, and home care providers to assess the feasibility of adapting this intervention, which uses management of severe malnutrition as an entry point, for community-based HIV care;
- ◆ An analysis of clinical records among past and current CTC program participants to assess the effectiveness of the CTC approach for reversing severe malnutrition in HIV-infected children and children orphaned due to maternal death.

The first part of the study was completed this year, and the second part is currently being implemented. Findings from the first part of the study indicate:

- ◆ In its present form, CTC successfully meets the nutritional, medical, and material requirements of malnourished children in the program. It was also reported to be advantageous due to its minimal impact on the daily activities and resources of the enrolled households and its decreased risk of contracting opportunistic infections. However, in targeting only malnourished children, the CTC approach has limited ability to meet the needs of the majority of HIV-affected and infected adults in the community. To reach HIV-affected adults, the CTC model will need to modify its targeting criteria to include sick adults and other indicators beyond child malnutrition;
- ◆ Study respondents identified the following areas for HIV-related care, classified as primary and secondary support needs. Primary needs were nutritional, material, medical, economic, psycho-social, spiritual, and patient care; secondary needs included food security, knowledge of HIV prevention strategies, and vocational skills;
- ◆ Current sources of HIV-care and support in the community came from formal and informal sources. Formal sources, such as NGOs and health centers, were found to provide nutritional, medical, food security, and economic assistance most effectively. Informal sources were most successful at addressing the spiritual, psycho-social, and patient care requirements of PLWHA and HIV-affected households. Respondents indicated, however, that the support provided by formal organizations has weakened the informal support structure. In particular, it has undermined traditional community involvement in caring for and assisting HIV-affected households and community's efforts to strengthen food security.

Malawi Safe Mother/Safe Baby Study

With financial support from the CDC and the University of North Carolina (UNC), Dr. Piwoz has been a co-investigator on the Malawi Safe Mother/Safe Baby study, a clinical trial being implemented by UNC in Lilongwe. The trial's purpose is to

evaluate the effectiveness of maternal nutrition supplementation for maintaining and improving the health of HIV infected mothers, to compare the efficacy of ARV triple therapy and infant ARV prophylaxis to reduce HIV transmission during breastfeeding, and to examine the feasibility and impact of early breastfeeding cessation and replacement feeding with locally-produced foods on infant growth, health, and survival. The study includes a team of investigators from UNC School of Medicine, CDC/Atlanta, UNC Project Malawi, and Dr. Piwoz.

This year, Dr. Piwoz traveled to Malawi in December 2003 to train study investigators on the nutritional aspects of the trial and on proper completion of the data collection forms. The study began enrollment in March 2004. Dr. Piwoz will return to Lilongwe in December 2004 to review progress and to suggest operational adjustments.

WHO HIV and Infant Feeding Analysis Workshop

In November 2003, Dr. Piwoz participated in a WHO workshop on study design and analysis on HIV and infant feeding. Professionals from major postnatal HIV transmission clinical and operational trials in Asia and Africa were present to discuss their study methodologies, analytic strategies, and preliminary results. After presenting the preliminary findings from the ZVITAMBO infant feeding and postnatal HIV transmission analysis, Dr. Piwoz received feedback, which was subsequently integrated into the analysis plan and manuscript submission.

Evaluation of the West Africa Nutrition Focal Points Network

The final report of the evaluation of the West Africa Nutrition Focal Points Network prepared by Kinday Samba, the SARA West Africa nutrition regional advisor, and Dr. Ismael Thiam of BASICS II WARO, was completed in February 2004 and submitted to HKI for translation into French. The final versions of the document were printed and disseminated at the 9th ECOWAS Annual Nutrition Forum held in Cotonou, Benin, in September 2004.

The evaluation concluded that:

- ◆ The network has contributed to an increased visibility for nutrition in the West Africa subregion. This is attributed to the increased technical and institutional capacity of network members;
- ◆ The network has only had limited influence on nutrition policies and programs. One reason is the apparent reluctance of member states to establish national nutrition networks. National networks are needed to guide the actions of the regional network, and to serve as a mechanism for implementing the network's recommendations at the national level;
- ◆ Major network achievements include developing PROFILES in most member countries; implementing programs to prevent and control micronutrient deficiencies; and increasing demand for technical capacity development and information and experience exchange;

- ◆ The network has improved communication between members, in addition to serving as both a framework for dialogue among partners to implement joint programs, and as an entry point for nutrition activities in certain countries. The evaluation outlined improvements in the network's organization and its principal activity, the Annual Nutrition Forums. Specifically, the evaluation recommended implementing a more participatory management strategy, strengthening communication between meetings, and requiring member states to become more involved in financing network activities to make it more sustainable.

PROFILES Monitoring and Evaluation

The final analysis and report on the impact of PROFILES in Africa was completed in early 2003. The evaluation included telephone and face-to-face interviews with 49 key informants who were involved in funding or carrying out PROFILES applications between 1997 and 2000 in three regional workshops and in Burkina Faso, Ethiopia, Ghana, Kenya, Madagascar, Mali, South Africa, Tanzania, Togo, and Uganda.

The evaluation revealed that PROFILES was successful in raising awareness about nutrition among different policy audiences, and succeeded in making nutrition a policy priority in several countries. This was evidenced by a reallocation of resources to support objectives and outcomes identified by PROFILES in countries such as Burkina Faso, Ethiopia, Ghana, Kenya, Mali, and Niger. PROFILES was viewed to be a flexible communication tool that helped establish consensus, build nutritionists' confidence by providing data-driven advocacy arguments, and improve networking among different nutrition-relevant policy actors and organizations.

To facilitate dissemination of the evaluation, Linda Kean, a SARA consultant, prepared a short brief describing the key results and lessons learned for the future. The brief was completed this year and uploaded to the SARA website. Dorcas Lwanga and Renuka Bery, SARA Dissemination and Advocacy Manager, developed a dissemination strategy brief with the PROFILES coordinator Helen Stiefel. The brief has been disseminated widely to African programs and institutions, and at the ECOWAS Nutrition Forum in Cotonou, Benin in September 2004.

In addition to the PROFILES evaluation, SARA continued to provide support to PROFILES applications in Africa this year. Kinday Samba co-facilitated a PROFILES workshop in Benin in January, and ECSA held PROFILES workshops in Swaziland and Zambia with technical support from AED/LINKAGES. A total of 45 people were trained in PROFILES: 13 in Benin and 16 each in Swaziland and Zambia.

Nutrition

Dissemination and Advocacy

Nutrition Care and Support

WHO Technical Advisory Group on Nutrition and HIV/AIDS

Dr. Ellen Piwoz continued her work as a member of the WHO Technical Advisory Group (TAG) on Nutrition and HIV/AIDS. This year she helped to write the final report on the May 2003 Consultation on Nutrient Requirements for People Living with HIV/AIDS, and also prepared a PowerPoint presentation to disseminate the results to the field. Dr. Piwoz also participated in the WHO regional meeting and workshop on program and policy issues related to HIV/AIDS in southern Africa, held in Durban, South Africa, in November 2003.

Throughout the year, Dr. Piwoz has participated in conference calls and meetings of the TAG to discuss progress on preparing the state-of-the-art review on nutrition and HIV/AIDS and provide comments on drafts. She is helping to organize the November 2004 TAG meeting, to be held at AED's offices. That meeting will focus on planning for the multi-donor Africa Conference on Nutrition and HIV/AIDS, scheduled for April 2005.

WHO Technical Guidelines for Nutrition Counseling, Care, and Support of HIV-Positive Women

Dr. Ellen Piwoz completed a paper *Nutrition Counseling, Care, and Support for HIV-Positive Women in Resource Limited Settings* for the WHO/Geneva Department of HIV Prevention. The paper was finalized and disseminated this year at the International AIDS Conference in Bangkok, Thailand. The paper is part of a comprehensive *Technical Reference Guide for the Care, Treatment, and Support of HIV-positive Women and their Children*. It is also being adapted by the editors of the U.S. Health Resources and Services Administration book, *A Guide to the Clinical Care of Women with HIV*, which is being updated this year.

National Guidelines and Policies on Nutrition Care and Support for People Living with HIV/AIDS

This year, the SARA nutrition team provided technical assistance to a variety of projects and institutions to enhance development and dissemination of guidelines on nutrition care and support.

- ◆ Dorcas Lwanga provided technical assistance to the FANTA project to review the national guidelines on nutrition care and support for people living with HIV/AIDS for Zambia and Uganda. This work is part of a regional effort supported by USAID/REDSO to increase capacity and develop nutrition guidelines in the region. Ms. Lwanga has provided assistance to FANTA to help ECSA countries develop national guidelines on nutrition care and support of people living with HIV/AIDS. To date, six countries (Botswana, Lesotho, Namibia, Tanzania, Uganda, and Zimbabwe) have completed and disseminated

their guidelines, and five other countries (Kenya, Malawi, Rwanda, Swaziland, and Zambia) have drafts at various stages of completion.

- ◆ Throughout the year, Ms. Lwanga has also worked in collaboration with the AED Center for Nutrition to moderate the ProNut-HIV electronic discussion forum. The aim of the forum is to share current information, knowledge, and experiences on nutrition care and support of PLWHA, to enhance positive living through proper nutrition care and support. AED hosts the forum.
- ◆ Ms. Lwanga also provided technical assistance to ECSA to update the nutrition and HIV/AIDS policy guidelines for nutrition care and support of people living with HIV/AIDS in the ECSA region. These guidelines were developed with financial support from WHO/AFRO.

Preservice Training on Nutrition and HIV/AIDS

From the start of 2002, in collaboration with LINKAGES, FANTA and REDSO, SARA provided technical support to the Regional Centre for the Quality of Health Care (RCQHC) to develop and produce a preservice training manual and supporting materials on HIV and nutrition. The manual is intended for preservice training of health workers and nutritionists in ECSA and consists of nine modules. Dorcas Lwanga prepared the module and related materials on nutrition care and support of HIV-positive pregnant and lactating women and adolescent girls. The complete training package was finalized and produced in August 2003 and disseminated by RCQHC this year. The training manual has already been widely used, and is currently part of national health worker training in South Africa as part of the antiretroviral distribution rollout program.

Ms. Lwanga also worked with LINKAGES and FANTA on a concept paper that was submitted to REDSO to develop an HIV and nutrition preservice training manual for nurses and midwives in East, Central, and southern Africa. ECSA is collaborating on this REDSO-funded activity, and sent a questionnaire to the nursing focal points in 14 countries to assess what information is needed for preservice training on nutrition and HIV/AIDS in nursing and midwifery training schools. The assessment findings were used to adapt the existing HIV and nutrition-training manual.

Ms. Lwanga was involved in developing the ECSA assessment tool, drafting the technical sessions, and preparing a workshop that was held with nursing school instructors and administrators in Dar es Salaam, Tanzania in December 2003.

All the sessions have been developed and are currently being reviewed. Ms. Lwanga was tasked with developing four of the sessions for this manual: prevention of mother-to-child transmission of HIV and infant feeding, nutrition care and support for HIV-positive pregnant and lactating women, adolescent nutrition in the context of HIV/AIDS (10-19 years) and child nutrition in the context of HIV/AIDS (2-9 years). The manual is expected to be completed in December 2004.

Nutrition

SARA will then work with FANTA and RCQHC to develop regional HIV/AIDS and nutrition training materials for community and home-based care providers. This activity is being funded by REDSO and is part of ongoing efforts to strengthen the capacity of community health workers and home-based care providers and counselors to provide nutritional care and support to people living with HIV/AIDS. The activity will be carried out in collaboration with RCQHC and is expected to be completed by September 2005.

Developing Counseling Tools for Nutrition Care and Support of People Living with HIV/AIDS

To improve nutrition care and support of PLWHA in Africa, SARA, FANTA, and LINKAGES worked with the RCQHC to develop a nutrition and HIV/AIDS counseling toolkit for community-level programming. This REDSO-supported activity will provide counselors with user-friendly materials to enable proper negotiation of nutrition and HIV/AIDS messages and actions.

RCQHC hired consultant Ms. Mary Materu to conduct a comprehensive assessment of existing nutrition and HIV/AIDS counseling at the community and health facility levels in Uganda. The assessment also included a desk review of materials being used for nutrition and HIV/AIDS counseling in the region. The assessment findings were used to identify and develop appropriate counseling materials for health facility and community-based counselors working with PLWHA in Uganda. Dorcas Lwanga has been working with LINKAGES and FANTA to develop these materials.

In May 2004, the draft materials were presented to counselors and PLWHA at a workshop in Jinja, Uganda. The materials were revised based on the workshop recommendations, pretested in July, and produced in August 2004. The finalized counseling material tool kit includes six materials as follows:

- ◆ One set of nutrition education counseling cards;
- ◆ A nutrition assessment tool for adults using weight and height;
- ◆ Answers to frequently asked questions on nutrition and HIV/AIDS;
- ◆ Food and nutrition counseling for clients on antiretroviral therapy – a job aid for counselors and antiretroviral therapy service providers;
- ◆ One tool for facilitating meal planning; and
- ◆ Dos and don'ts handout.

A regional workshop to introduce and disseminate the counseling materials to other ECSA countries and to discuss how they can be adapted will be held in October 2004.

MTCT and HIV and Infant Feeding

Developing Counseling Tools for HIV and Infant Feeding

SARA worked on and completed these activities in collaboration with WHO/ Geneva to improve the counseling of HIV-positive women on infant feeding issues.

- ◆ Dr. Piwoz completed work on a formative analysis manual entitled *What are the Options? Using formative research to adapt global recommendations on HIV and infant feeding to the local context*. This manual is available both electronically and in hard copy from WHO, and it is included on the WHO CD-ROM titled *Infant and Young Child Feeding: Tools and Materials*.
- ◆ With support from the SARA dissemination team, Elizabeth Thomas, a SARA consultant, finalized the package of counseling tools for helping health workers to counsel HIV-positive mothers about infant feeding issues. These tools, developed by AED with technical and financial support from WHO's Child and Adolescent Health Department, include a set of generic counseling cards and take-home flyers, a technical reference guide for health workers, and an orientation manual. The final materials will be produced by WHO, with technical support from SARA, in early 2005.
- ◆ Following the WHO informal consultation on feeding of the non-breastfed child 6-24 months, held in March 2004, Dr. Ellen Piwoz drafted a summary consensus statement titled *Summary statement on key issues around early breastfeeding cessation for infants and young children of HIV-positive mothers: Timing, care, and safe transition*. (See Issues Identification section)

Dissemination of New Findings on Prevention of Mother-to-Child Transmission of HIV/ AIDS

SARA participated in a number of dissemination activities related to PMTCT this year, with an emphasis on postnatal HIV transmission. In addition to those already mentioned throughout this report, Dr. Piwoz presented:

- ◆ A technical update at USAID on the nutritional requirements for PLWHA (December 2003);
- ◆ The keynote address at a USAID-supported conference in Ethiopia on HIV/ AIDS and nutrition (March 2004);
- ◆ On nutrition and ARVs at the World Bank (April 2004);
- ◆ On nutrition and HIV/AIDS as part of USAID's Regional and Country Support Presents series (May 2004);
- ◆ On nutrition and HIV/AIDS at FHI (June 2004); and
- ◆ The impact of new WHO guidelines for preventing HIV infection in children during breastfeeding at UNICEF for the meeting of the Interagency Technical Task Force on the Prevention of Mother-to-Child Transmission of HIV (September 2004).

In addition to technical presentations, SARA has worked with LINKAGES on several publications.

Nutrition

- ◆ A review paper titled “HIV Transmission during Breastfeeding: Knowledge, Gaps and Challenges for the Future” was published in *Advances in Experimental Medicine and Biology* in the fall of 2004.
- ◆ A letter to the editor of the journal *AIDS* on HIV and breastfeeding issues was published in March 2004.
- ◆ A report on formative analysis in PMTCT programs was published by LINK-AGES with technical inputs from SARA.

Dr. Piwoz also served as a peer reviewer for several international journals, including *AIDS*, *JAIDS*, *the Journal of Nutrition*, *the Archives of Childhood Diseases*, and *Pediatric Gastroenterology and Nutrition*, among others, on HIV and infant feeding/nutrition issues.

Essential Nutrition Actions

Nutrition Briefs: Multisectoral Involvement in Nutrition

This year, a new brief on nutrition and non-communicable diseases was drafted for ECSA’s popular Nutrition Briefs series. Ms. Dorcas Lwanga developed the brief, which was disseminated at the ECSA nutrition focal point meeting in Port Louis, Mauritius, in October 2003. The theme of the meeting was “Strengthening the Prevention and Control of Non-Communicable Diseases in East, Central and Southern Africa: Challenges and Options.” The brief was well received and used as a platform to advocate for preventing and controlling non-communicable diseases in the region.

Integrating Nutrition Tools and Approaches into NGO Programs in West Africa

In 2003, BASICS II WARO hired a consultant to conduct a situation analysis of nutrition activities of NGOs in West and Central Africa. The consultant collected information from 39 NGOs in 10 countries and looked at the types of activities implemented by these NGOs, the target audiences, and the types of nutrition approaches and tools used. The report identified key priority nutrition intervention areas and confirmed the need for technical updates on skills and information to improve effectiveness of activities in these areas.

SARA, BASICS, and Helen Keller International planned and implemented a regional initiative to facilitate the integration of nutrition approaches and tools into the nutrition program of NGOs from Burkina Faso, Mali, and Senegal. Nutrition program managers from Benin, Cote d’Ivoire, Guinea and Niger were also invited to follow the process.

Between March and May 2004, SARA West Africa Nutrition Advisor Kinday Samba and BASICS WARO Nutrition Advisor Dr. Ismaela Thiam facilitated three five-day workshops for 140 participants. These participants represented approximately 70 national and international NGOs and NGO consortia operating in Burkina Faso, Mali, and Senegal. The participants included nutrition focal points and representatives of NGO consortia and international NGOs. Representatives

from the nutrition services and regional health departments from the ministries of health also attended. These workshops were held in March 2004 in Dakar, Senegal, and Bamako, Mali, and in April 2004 in Ouagadougou, Burkina Faso.

The workshops aimed to familiarize program managers from the NGOs with a selection of nutrition approaches and tools based on the Essential Nutrition Actions (ENA), and to help develop a realistic plan of action to strengthen capacity to deliver nutrition intervention services at the community level with greater impact on maternal and child survival.

Participants used the information gained from technical update presentations, country experiences related to nutrition intervention strategies and tools, and support materials distributed, to develop a two-year plan of action for strengthening nutrition activities. Participants addressed each of the three priority nutrition themes addressed by the ENA (maternal nutrition, the feeding of infants and young children, and the prevention of micronutrient deficiencies). Trainers also introduced approaches and tools relating to community nutrition programming, behavior change communication (BCC), and advocacy to strengthen the planning and implementation of nutrition programming. Key steps in the action plan included revising training manuals and BCC support materials, training community-based workers, and conducting advocacy to convince decision makers to revise priority target groups and certain intervention strategies. Concrete actions for monitoring and evaluation action plan implementation were also defined at the NGO, national, and regional levels.

The workshops were planned and implemented by a regional coordinating committee comprised of partners involved in approaches and tools dissemination and capacity building for nutrition in the region, in addition to a national coordinating committee headed by national health NGO umbrella organizations, representatives from the public sector, and development partners involved in nutrition at the national level. At the regional level, the partners involved in planning and implementing the workshops included HKI Africa Regional Office, who hosted the Burkina workshop, UNICEF West and Central Africa Regional Office, and AWARE-RH. In 2005, SARA will monitor the implementation of the national action plans in collaboration with the coordinating and evaluation committees established at the national levels for this purpose. The results of these monitoring activities will be used to assess the activity's impact on NGOs' nutrition programs in West Africa.

West Africa Training Modules on Essential Nutrition Actions

The nutrition training guide on Essential Nutrition Actions for Health and Social Workers in West Africa was finalized and published by BASICS II on CD-ROM in July 2004. The training package includes the following five modules:

- ◆ Importance of Nutrition in Socioeconomic Development and National Health
- ◆ Key Nutrition Interventions
- ◆ Strategy for Integrating Nutrition into Health Care Activities

- ◆ The Importance of Appropriate Nutrition Counseling in Achieving Effective Behavioral Change
- ◆ Nutrition as Part of Health Management Information Systems

Limited numbers of the CD-ROMs have been disseminated. Due to late arrival of the CDs at the venue of the 9th ECOWAS Annual Nutrition Forum, it was not possible to disseminate the modules through the West Africa Nutrition Focal Point Network. However, other regional activities are being used to disseminate the document.

Capacity Building and Collaboration with African Institutions

West Africa Health Organisation (WAHO)

SARA continued to support WAHO in strategically planning and organizing the Annual Nutrition Forum. Kinday Samba worked with the International Planning Committee to organize the 9th Annual Forum, which was held in Cotonou, Benin, in September 2004. The SARA project also coordinated and organized the technical update session on “Nutrition and HIV/AIDS: Opportunities and Challenges.” SARA assistance included:

- ◆ Identifying a panel of speakers on state-of-the-art analysis and policy information related to the theme of nutrition and HIV/AIDS;
- ◆ Preparing an introductory paper briefly outlining the theme’s relevance and the objectives and format of the technical update session;
- ◆ Compiling a package of resource materials in print and CD-ROM formats to distribute to participants;
- ◆ Preparing terms of reference and facilitating group work to develop tangible and actionable recommendations to strengthen the capacity of national and regional actors to guide policy and programmatic decisions in nutrition and HIV/AIDS.

During the technical update, 10 presentations were made around the following sub-themes: introduction to nutrition and HIV/AIDS in West Africa; HIV/AIDS and food and nutrition security; nutrition care and support of PLWHA; and preventing mother-to-child-transmission of HIV. Dr. Ellen Piwoz made two presentations on nutrition and HIV/AIDS and HIV and infant feeding. Dorcas Lwanga presented on the technical issues for nutrition care and support of people living with HIV/AIDS.

In addition, SARA supported four other resource persons from Africa to attend the update. Each resource person presented one subtheme. SARA also organized a panel session on nutrition and antiretroviral therapy. According to the evaluation, participants found all the presentations and the panel session discussion useful.

In the forthcoming year, SARA will prepare and disseminate the final report on the technical update session.

In addition to support from SARA the meeting received considerable financial assistance from the government of The Republic of Benin (approximately

US\$55,000), USAID/Benin (approximately US\$30,000), the USAID AWARE project, HKI, UNICEF, the Food and Agriculture Organization, and WHO.

The recommendations of the forum were:

- ◆ The partners should support countries to integrate/strengthen the nutrition component of national AIDS control programs;
- ◆ Partners should support national bodies to establish or strengthen national nutrition networks;
- ◆ The countries should adapt the Ugandan example for developing national guidelines for nutritional care and support of PLWHA and integrate them into existing health service delivery systems;
- ◆ Countries are encouraged to update and scale up PMTCT efforts with the focus on feeding of HIV-exposed children;
- ◆ Countries without a functional network should speed up the establishment of their national nutritional networks, and countries with networks should strengthen them in line with the role assigned to them;
- ◆ Countries are urged to include nutrition as part of HIV and AIDS control programs;
- ◆ WAHO should directly advocate to Ministers of Health and other ministries and institutions to draft, strengthen, and effectively enforce legislation regarding marketing of breast milk substitutes considering the HIV/AIDS context; and
- ◆ WAHO should accelerate the finalization and implementation of the West African action plan on the African nutrition capacity development initiative and the ECOWAS nutrition forum strategic plan.

“Nutrition and Non-Communicable Diseases” was identified by the focal points as the technical theme for the 2006 forum, which will take place in Praia, Cape Verde.

ECSA Health Community Secretariat

Dorcas Lwanga continued to provide support to the ECSA food and nutrition coordinator to monitor progress under the SARA/AED subcontract. This year there was a change in leadership as the food and nutrition coordinator, Ms. Biotshepo Giyose, left ECSA when her term ended. She was replaced by Ms. Mofota Shomari.

Ms. Lwanga provided technical assistance to review two new nutrition briefs developed by ECSA: *Nutrition in Times of Emergencies* and *Multi-sectoral Approaches to Combating Micronutrient Deficiencies*. ECSA hired a consultant to develop the briefs and SARA provided technical assistance to review them. They will be completed in the coming year. Ms. Lwanga also provided Ms. Shomari with technical input for a presentation at the DJCC meeting on nutrition and HIV/AIDS and assisted her to plan and organize in-country PROFILES presentations in Zambia and Swaziland.

Nutrition

Makerere University Regional Center for Quality of Health Care (RCQHC)

SARA worked with RCQHC on several activities to improve policies, capacity, and programming related to nutrition care and support of PLWHA. These activities are described in detail under dissemination and advocacy above. SARA will continue its multi-partner collaboration with RCQHC in the coming year.

Illustrative Results

Policy

- ◆ Nutrition is incorporated into the President's Emergency Plan for AIDS Relief and supported in country programs in Ethiopia, Kenya, Mozambique, Rwanda, South Africa, Uganda, and Zambia.

Capacity

- ◆ 140 program managers and nutritionists from 70 national and international NGOs from Burkina Faso, Mali, and Senegal were introduced to ENA tools and approaches.
- ◆ 111 trainers, 90 health service providers, and 2220 university students have been exposed to the preservice training manual on nutrition and HIV/AIDS as of September, 2004.
- ◆ Six countries in the ECSA region (Botswana, Lesotho, Namibia, Tanzania, Uganda, Zimbabwe) have finalized and printed their national guidelines for nutrition care and support of people living with HIV/AIDS.

Tools Development and Use

- ◆ Four new tools for improved nutrition-related policies and programs developed in collaboration with African and international partners (HIV and infant feeding, formative analysis, counseling on nutrition and HIV/AIDS, and training on nutrition and HIV/AIDS).
- ◆ Four national-level institutions (The AIDS Support Organisation (TASO); Joint Clinical Research Centre (JCRC); Infectious Disease Institute-Academic Alliance Clinic; Mildmay International) all in Uganda have used the counseling materials on nutrition and HIV.

D. Population/Reproductive Health/Maternal Health (SO 20)

SARA Advisors:

Holley Stewart, Reproductive Health Advisor, PRB

Antonia Wolff, Dissemination Specialist, AED

Rhonda Smith, Consultant, PRB

SARA activities support the following AFR/SD intermediate results for reproductive health:

IR 1: Improved policies and strategies to expand reproductive health programs promoted

IR 2: Improved enabling environment to design, implement, and evaluate reproductive health programs.

Technical Support to AFR/SD Reproductive Health Team

SARA was called upon to assume greater responsibility in assisting AFR/SD to administer the SO 20 portfolio during a period of AFR/SD staff changes this year. SARA also helped to ensure the continuity and momentum of activities, including initiatives dealing with contraceptive security, repositioning family planning, postabortion care, and reducing maternal and neonatal morbidity and mortality.

The RH core team held regular meetings this year with the new AFR/SD advisor working part-time on reproductive health. Additionally, SARA Reproductive Health Advisor Holley Stewart met with the AFR/SD RH advisor and various CAs to update the matrix of AFR/SD-funded activities. She also organized several meetings with CAs and USAID on the Repositioning Family Planning initiative.

SARA staff worked closely with AFR/SD to review the results packages and monitor ongoing activities. This work included negotiating scopes of work for newly funded activities, guiding dissemination strategies, participating in evaluations, and obtaining regular progress reports for CAs.

SARA participated in numerous meetings, workshops, conferences, and lessons learned sessions on topics related to the AFR/SD results packages. Examples include:

- ◆ Symposium on youth and HIV prevention;
- ◆ Meetings on the prevention of mother-to-child HIV transmission, female genital cutting, postabortion care, and maternal and newborn health; and
- ◆ Technical updates on malaria in pregnancy, maternal and newborn health, and repositioning family planning.

Such collaboration and participation ensures that SARA and AFR/SD are up-to-date on best practices and can facilitate follow-up activities, including dissemination and advocacy.

Population/Reproductive Health/Maternal Health

SARA is assisting AFR/SD to coordinate a small working group to ensure maximum collaboration and synergy between the new ACCESS project, WHO/AFRO, and SARA on maternal and newborn health issues. SARA serves as the secretariat for this group.

Issues Identification

Female Genital Cutting Initiative

SARA continued to participate in the interagency working group to eradicate female genital cutting (FGC). Ms. Stewart participated in several discussions with USAID/GH FGC Technical Advisor Abdelhadi Eltahir and the working group to refine the FGC strategy and finalize the workplan.

Repositioning Family Planning

Rhonda Smith worked with USAID in drafting its agency-wide Repositioning Family Planning strategy, identifying objectives, indicators, and activities. The strategy will be presented to cooperating agencies in December 2004.

Analysis

Review of Adolescent Reproductive Health Programs/Policies in the Sahel and Adolescent Knowledge, Attitudes, and Practice Trends in RH/FP in the Sahel

SARA continues to support our African regional partner, CERPOD, to analyze and review ARH programs and issues in the Sahel as an update to the *Youth in Danger* activity conducted in 1996. The analysis was completed this year. In July 2004, however, CERPOD's communications specialist left his position, stalling the packaging of the findings into a user-friendly brochure. At SARA's suggestion, CERPOD contracted a consultant in October 2004 to complete this work. In February 2005, CERPOD is expected to disseminate the brochure and conduct a regional workshop on the status of ARH with a focus on policy implementation and advocacy. SARA's work is helping CERPOD to identify essential points for renewed advocacy in the region on ARH.

FGC Initiative

Holley Stewart, as a member of the USAID interagency working group on FGC, reviewed language and questions for the new FGC module to the DHS which Macro had drafted.

Dissemination and Advocacy

Repositioning Family Planning

This year, SARA organized several meetings with CAs to update USAID on their work to reposition family planning. Ms. Stewart also worked with USAID and the

PHNI Project to draft a CA working group strategic framework for the initiative. As a result of SARA's efforts and those of Advance Africa, WHO/AFRO has developed its own framework for implementing the initiative which was endorsed by 46 countries in August 2004.

Antonia Wolff participated in a Bureau for Global Health-initiated activity to promote collaboration among CAs working on integration of FP/HIV programs and materials to prevent duplication and to promote synergies among organizations. Ms. Wolff has attended several meetings and serves on the dissemination task force for this activity.

PAC Initiative in Francophone Africa

SARA continues to participate in the Postabortion Care (PAC) Consortium and the USAID interagency group on PAC. Ms. Stewart and Renuka Bery, SARA's advocacy and dissemination manager, chair the Consortium's communications task force. SARA supports the Francophone PAC Initiative's secretariat, which is coordinated by CEFOREP. This year, CEFOREP:

- ◆ Collected information from countries and international partners on introducing and extending PAC (including information on policies, programs, agendas and needs of countries, results achieved, PAC activities of partners, best practices, lessons learned, and new developments); and
- ◆ Shared information among partners and Francophone countries through the PAC Consortium's newsletter and via email.

SARA is supporting CEFOREP in conducting a satellite meeting with the PAC focal points of eleven countries in West Africa at the SAGO conference in December 2004.

SARA edited and produced English and French versions of the reference document *Issues in Postabortion Care: Scaling-Up Services in Francophone Africa*. The English report has been widely disseminated throughout Africa, with over 1,131 reports sent out by request. Countries that have received the document include: Burkina Faso, Côte d'Ivoire, Congo/Brazzaville, DR Congo, Senegal, and Zimbabwe. The English version has since been reprinted and the French version will be disseminated the first quarter of FY 2005.

Maternal and Neonatal Health Advocacy

Roadmap to Reduce Maternal and Newborn Morbidity and Mortality

SARA provided technical support for WHO/AFRO during its meeting with regional partners to develop a road map for regional and country stakeholders for attaining the Millennium Development Goals related to MNH in Africa and to ensure the continued inclusion of AFR/SD issues, including repositioning family planning. As a global rapporteur, Holley Stewart drafted the workshop's report and also assisted in drafting the road map—WHO/AFRO is asking its partners to en-

dorse and support implementation of the working document. The road map has been distributed to all 46 countries, some of which have started to adapt it to the specific country context. The road map provides a synthesis of approaches to safe motherhood and newborn care. It highlights the importance of the following to MNH programs:

- ◆ Partnership—commitment of partners to work together at country level;
- ◆ Human resources (skilled attendant);
- ◆ Services at first contact level;
- ◆ Strengthening referral system and emergency obstetric care;
- ◆ Contraceptive services to reduce unwanted pregnancies and number of maternal deaths;
- ◆ Early care of the newborn;
- ◆ Increase resources and joint funding mechanisms for MNH and FP;
- ◆ Empowerment of women at the community level;
- ◆ Male involvement;
- ◆ Reaching the poor and vulnerable groups (e.g., adolescents); and
- ◆ Renewed regional focus on the problem of MNH.

The aim of the road map is to enable countries to accelerate the reduction of maternal and newborn morbidity and mortality. Countries and partners need to implement strategies that will save lives at all ports of call, whether they are primary, secondary, or tertiary care settings. The road map also provides guidance to help countries determine which competencies are required in the places closest to the population in need and what advocacy steps should be taken to engage all in-country stakeholders, communities, and households so that services will be well supplied and used.

Application of REDUCE/ALIVE

SARA continued to assist WHO/AFRO in generating support for REDUCE/ALIVE in other countries that have requested help with its application and/or follow up advocacy. Applications and follow-up activities took place in Ethiopia, Ghana, Mali, and Uganda this year, with funds leveraged from the World Bank, WHO/AFRO, the USAID AWARE-RH project, and Save the Children/Saving Newborn Lives. The Ethiopian MOH, World Bank, WHO/Ethiopia, and USAID/Policy Project provided support for a November 2003 symposium as a follow-on to the earlier country application process and achieved the following:

- ◆ Reducing maternal mortality is now one of Ethiopia's Millennium Development Goals; and
- ◆ The Ethiopian Ministry of Health will conduct advocacy programs with the parliamentarians and at the regional-level for social mobilization.

Other follow-up activities this year in Mauritania and in the African Region to promote MNH resulted in:

- ◆ In Mauritania, MOH and UN agencies set targets for MNH and family planning in their six-year framework (2003–2008); and
- ◆ Advocacy to the First Ladies and to the African Union has made MNH a top priority of the agenda of these two organizations.

Formative Qualitative Analysis on Community Maternal and Newborn Care

SARA worked with WHO/AFRO and USAID on AFRO's proposal to:

- ◆ Define the scope and outputs of a formative study to develop an assessment tool on community maternal and newborn care;
- ◆ Determine the process and timing for the study and capacity development activities;
- ◆ Discuss the budget; and
- ◆ Discuss how to fully involve USAID HQ and Missions.

The study is expected to be conducted starting in January 2005.

Development of AF/SD Maternal and Newborn Health Strategic Framework

SARA assisted the Africa Bureau in the development and drafting of its maternal and newborn health strategic framework. Four areas of special need in Africa were identified for the Bureau to focus on:

- ◆ Support advocacy to mobilize resources and improve the policy environment for maternal and newborn care;
- ◆ Disseminate effective approaches to improve the quality of care;
- ◆ Develop and disseminate effective community and household approaches; and
- ◆ Strengthen African regional leadership and national capacity to implement programs.

Promoting Better Policies and Increased Attention to Malaria in Pregnancy

Ms. Stewart represented SARA at the meeting to launch the MIP network for West Africa (RAOPAG). Since the meeting, SARA has worked with the MNH project and the RBM and the Malaria Action Coalition (MAC) consortia to support RAOPAG's agenda. SARA linked MNH and PATH with ECSA to coordinate follow-up activities from the advocacy training workshop PATH and MIPESA held in January 2004. The outcome of the MIPESA training workshop informed the development of a similar workshop for RAOPAG. SARA linked WHO/AFRO, RAOPAG, and AWARE-RH together to support similar advocacy training for the West African epidemiological block.

Capacity Building and Collaboration with African Institutions

CERPOD

SARA is supporting CERPOD/Institut du Sahel to ensure that results from analyses CERPOD is carrying out in the region in 2004 are packaged and disseminated,

Population/Reproductive Health/Maternal Health

particularly on adolescent reproductive health. SARA is also supporting a regional meeting that CERPOD is organizing to highlight the findings and stimulate increased implementation of advocacy activities to promote youth reproductive health in the Sahel.

CEFOREP

SARA supported CEFORP in assuming the responsibilities of the Francophone PAC Initiative secretariat from IntraHealth, and helped to develop a scope of work and a budget for planned activities, including a regional meeting with PAC country focal points. SARA also helped CEFORP identify areas of collaboration on PAC advocacy and scale-up with AWARE-RH.

ECSA

Ms. Stewart linked ECSA with PATH for the advocacy training workshop for MIPESA. ECSA had conducted a review of guidelines for malaria in pregnancy with SARA's support and presented its findings at this meeting. ECSA Family and Reproductive Health Coordinator Dr. Ominde Achola will assist in following-up on the advocacy plans developed at the workshop.

Ms. Stewart also linked ECSA with YouthNet for its regional workshop on advocacy for youth reproductive health in Tanzania in May 2004. Dr. Achola presented the findings of a rapid analysis of adolescent sexual and reproductive health and HIV/AIDS-related policies in Uganda, Zambia, and Zimbabwe. ECSA will disseminate the recommendations of the meeting and follow up, in coordination with the YouthNet and Policy projects, on implementing the advocacy plans.

Mwangaza Action

SARA worked with Mwangaza Action primarily to identify areas of collaboration with SARA and the regional project AWARE-RH. SARA helped to coordinate meetings between Mwangaza Action's program coordinator and AWARE-RH advocacy, reproductive health, and institutional capacity building advisors. Ms. Stewart has been working closely with Mwangaza Action to finalize its plans to organize a regional working group on best practices of social mobilization in 2005.

RAOPAG

Ms. Stewart participated in the first RAOPAG meeting held in Cotonou, Benin in October. The meeting created an operating structure for RAOPAG. Specific objectives included:

- ◆ Adopting terms of reference, an organizational structure for the network, and the first annual action plan;
- ◆ Developing the country chapters' progress report on appointing malaria teams that act as liaisons for the regional network; and
- ◆ Identifying possible funding sources to support the network action plan.

The meeting recommendations included:

- ◆ Integrating the West African countries absent from this meeting into the network and helping to facilitate this process by sending these countries the report, setting up country facilities, and inviting them to the next meeting;
- ◆ Formalizing RAOPAG's status as a network;
- ◆ Assisting countries to strengthen antenatal care quality in health departments to increase the impact of intermittent presumptive treatment and insecticide-treated bednets; and
- ◆ Intensifying malaria control and safe motherhood program partners' technical and financial support to the Network to help achieve the Abuja objectives.

Ms. Stewart met with Dr. Antoinette Ba from WHO/AFRO to discuss next steps for collaboration to strengthen RAOPAG's advocacy capability.

Following the meeting, SARA worked with the MNH project and the RBM and MAC consortia to help define RAOPAG's working agenda. SARA linked MNH and PATH to ECSA to coordinate follow-up of the advocacy training workshop PATH and MIPESA are planning in January 2004. The outcome of the training workshop informed the development of a similar workshop for the West African epidemiological area, for which SARA leveraged support from WHO/AFRO, RAOPAG, and AWARE-RH.

SARA co-led with PATH a subworking group on MIP advocacy within the RBM Working Group.

WAHO

Holley Stewart participated in the regional workshop with ECOWAS RH program managers on developing a subregional Strategy for the Reduction of Maternal and Perinatal Morbidity and Mortality in Accra, Ghana in November 2003. The workshop brought together senior- and mid-level health professionals, RH and MNH program managers, and representatives of nongovernmental and international organizations. It was organized by WAHO with support from AWARE-RH. It was a follow-on meeting to the ECOWAS ministers' meeting held in July 2003, at which WAHO presented the draft of its maternal and perinatal health (MPH) strategy and at which RH/FP commodities securities was discussed. It was also a follow-on to the small work group sessions WAHO held with partners, including SARA, to draft the framework for its maternal and perinatal health program.

The purpose of the workshop was to:

- ◆ Review the draft WAHO subregional strategy for the reduction of maternal and perinatal mortality and develop a logistical framework for implementation;
- ◆ Develop a commodity security plan to include RH/FP commodities;
- ◆ Initiate dialogue on a financing strategy to support the implementation of the WAHO framework; and
- ◆ Develop a work plan for the first six-to-twelve months of the framework.

Ms. Stewart participated in the working groups that helped to finalize the WAHO MPH strategic framework. The framework will promote a maternal and perinatal health plan for West Africa, include an RH/FP commodities security plan, and strengthen links between WAHO, WHO/AFRO, and partners.

WHO/AFRO

SARA Project Director Suzanne Prysor-Jones is a member of WHO/AFRO's Regional Reproductive Health Task Force, and attended its annual meeting in October 2003. She helped to facilitate sessions and draft the recommendations. The meeting called on all partners to develop and implement a common Roadmap for accelerated maternal and newborn mortality reduction. A Roadmap was developed and endorsed by regional partners in February 2004 during a meeting that Ms. Stewart attended; she served as the meeting's rapporteur and helped to draft the Roadmap document. Ms. Stewart assisted WHO/AFRO in getting various partners to support it. The Roadmap was presented to and endorsed by the African Union during the World Health Assembly in May 2004. Central African Republic, Comoros and Zambia have already adapted the Roadmap for their contexts and begun to operationalize it. SARA also assisted WHO/AFRO to develop an implementation guide for the Roadmap. In July 2004, Ms. Stewart assisted WHO/AFRO and non-SARA AED staff to develop a proposal for formative analysis to assess maternal and newborn care at the community level. SARA staff also provided technical assistance in developing the WHO/AFRO/RH proposal to USAID/AFR/SD this year.

Illustrative Results

- ◆ Subregional MPH strategy for ECOWAS member states developed.
- ◆ Family planning incorporated into the regional roadmap as an intervention to be integrated into maternal and newborn programs, developed by WHO/AFRO and partners.
- ◆ Production and dissemination of a reference document on scaling-up postabortion care services in Francophone Africa disseminated in English and French.
- ◆ Funding leveraged for REDUCE/ALIVE in Ethiopia, Ghana, Mali, and Uganda.
- ◆ CEFOREP's leadership established in moving the PAC initiative forward in Francophone Africa as the PAC secretariat.

E. HIV/AIDS Prevention and Mitigation (SO 21)

SARA Advisors:

Agnieszka Sykes, HIV/AIDS Advisor, AED (January–September 2004)
Stephen Kinoti, HIV/AIDS Advisor, AED (October 2003–March 2004)
Sambe Duale, Senior Analysis Manager, Tulane University
Ellen Piwoz, Nutrition Advisor, AED
Renuka Bery, Dissemination and Advocacy Manager, AED
Dorcas Lwanga, Nutritionist, AED

SARA activities support the following AFR/SD intermediate results for HIV/AIDS:

- IR 1: Improved strategies and models
- IR 2: Increased African commitment
- IR 3: Increased African regional and national capacity to plan, manage and implement improved HIV/AIDS programs
- IR 4: Enhanced coordination of partners to support HIV/AIDS programs in Africa

Technical Support to AFR/SD HIV/AIDS Team

SO21 Core Team Meetings

A few HIV/AIDS core team meetings were held during FY 2004; however, these meetings were not very regular. In March, Peter Salama joined USAID, while Peter McDermott left in April to head HIV/AIDS for UNICEF. Peter Salama held two core team meetings in July and August to discuss key activities with USAID/GH, SARA, and other partners. The team meetings helped to identify priority activities and follow up on subsequent actions.

SARA and AFR/SD also held several work plan meetings to discuss activities, review budget status, and discuss AFR/SD priorities. As a result of these meetings, Dr. Salama requested a work plan that presented information on the pipeline budget, the balance, and deliverables/outputs. This revised work plan was submitted to AFR/SD.

New Areas Identified by AFR/SD as Needing Support from SARA:

- ◆ Economic strengthening for improving the safety and well-being of orphans and vulnerable children
- ◆ Pediatric HIV/AIDS

SARA in collaboration with partners has started addressing the listed issues. Details are presented in relevant sections of this report.

Issues Identification

Economic Strengthening for Orphans and Vulnerable Children

There is growing recognition that one of the most important ways to improve the well-being of orphans and vulnerable children is to reinforce and strengthen the economic safety nets on which they depend. Ms. Sykes played a central role in leading this initiative, which has been identified as an AFR/SD priority. In early 2004, AFR/SD asked SARA to organize an international workshop on economic strengthening for orphans and vulnerable children to bring together a select group of experts in economic strengthening/livelihoods and vulnerable children to discuss improving and scaling up technical interventions in this area. A workshop was held June 14-15 in Dar es Salaam, Tanzania. SARA subcontracted Enterprising Solutions to assist with in-country logistics and the economic strengthening technical aspects of the workshop. Ms. Sykes was responsible for the overall organization (content and logistics) of the workshop, and facilitated sessions.

The objectives of the workshop were to:

- ◆ Identify and review current programs, promising practices, and lessons learned;
- ◆ Review existing guidance material on how to improve the economic circumstances of families and communities to benefit orphans and vulnerable children;
- ◆ Make recommendations regarding the development of guidance material and capacity building activities; and
- ◆ Recommend critical actions and next steps for ongoing collaboration.

During the workshop, the participants observed that there was an urgent need to devise mechanisms to improve the technical capacity of organizations implementing household economic strengthening initiatives for orphans and vulnerable children. Central to participants' vision of a way forward was developing a mechanism for ongoing exchange and collaboration among those with expertise and experience in economic or livelihood strengthening and others focused on especially vulnerable children. Participants identified five action areas to bring to scale interventions for microeconomic strengthening to benefit vulnerable children:

- ◆ Carry out a critical review of relevant tools and documents;
- ◆ Initiate action research to answer strategically important questions relevant to effectiveness and scaling-up;
- ◆ Improve program design, monitoring, and evaluation;
- ◆ Improve technical capacity within programs and organizations to implement effective interventions; and
- ◆ Develop a comprehensive strategy to mobilize the resources needed.

They agreed to continue to work together and to include others in a network for economic strengthening to benefit vulnerable children. Ms. Sykes is continuing to play a coordinating role with John Williamson of the Displaced Children and Orphans Fund, USAID/AFR, and Eileen Miamidian, of Enterprising Solutions, in supporting the ongoing activities of this network. The goal of the network is to

have a strategic plan reflecting the objectives of each of the working groups and to use this plan to mobilize resources and support for activities.

Analysis

Public Sector Health Workforce Reports for Kenya and Malawi

Dr. Stephen Kinoti visited Malawi to facilitate data analysis and preparation of the country reports on the impact of HIV/AIDS on the health workforce in Kenya and Malawi based on assessments undertaken between April and October 2003. Dr. Kinoti prepared an executive summary of the Malawi results and shared this with Malawi's Ministry of Health and Population and AFR/SD.

In early 2004, teams from Kenya and Malawi submitted draft assessment reports on the *Challenges Facing the Health Workforce in the Era of HIV/AIDS (Kenya and Malawi)*. The reports focus on health worker attrition, death, absenteeism, deployment, and training. Ms. Sykes and Ms. Bery worked with two consultants, Paula Whitacre and Nancy Ali, to distill, rewrite, and repackage the data into two reports. Ms. Sykes was in frequent communication with the field assessment team in order to clarify questions about the assessment methodology and data. Ms. Sykes also wrote a two-page brief summarizing each report's key findings and recommendations. These reports and briefs will serve as a basis for key stakeholder meetings that will be held in Kenya and Malawi. These meetings will bring together partners working on the human resource issues. Next steps will also be identified to address some of the challenges identified in the reports. Ms. Sykes developed a PowerPoint presentation on the Kenya Health Workforce Report for a Stakeholder Meeting that ESCA and the Kenyan MOH are organizing for late 2004. Ishrat Husain has shared these reports and briefers with the USAID Missions in Kenya and Malawi.

Impact of HIV/AIDS on the Cocoa Industry in Ghana

At the request of AFR/SD, SARA is managing subcontracts with the Boston University and the University of Ghana to carry out a study to determine the extent to which morbidity and mortality are affecting production outcomes of smallholder cocoa farming households in Ghana and the quantity and quality of Ghana's cocoa exports. Data for the farm-level analysis will be generated through a cross-sectional household survey of approximately 700 households. The data will help to estimate the extent to which chronic morbidity and mortality affect key farm production decisions and outcomes, such as inputs used, cocoa produced, and other crops produced. Boston University will then apply sectoral modeling approaches to estimate the extent to which farm-level production changes are transmitted up the marketing chain to export markets. The results of this baseline study will help the Government of Ghana, international agencies, and researchers develop and evaluate effective strategies for promoting agricultural growth and improved health in rural areas.

HIV/AIDS Prevention and Mitigation

Basic Care Package for Children Living with HIV/AIDS

In August, SARA worked with AFR/SD and a consultant, Amanda Gibbons, to develop a basic care package for infants and children living with HIV/AIDS. The *Basic Care Package for HIV-Positive Children* focuses on evidence-based interventions that should be available to all HIV-positive infants and children and all infants born to HIV-positive adults and is modeled on the *Basic Care Package for PLWHAs*. SARA shared pediatric HIV/AIDS documents with Ms. Gibbons and Agnieszka Sykes, while Ellen Piwoz provided AFR/SD with technical input on Ms. Gibbon's draft.

Human Resource/Health Workforce Reports

At the request of AFD/SD, Ms. Sykes collected HR studies carried out by various NGOs (Abt Associates/Partners for Health Reform^{plus}, MSH, and University Research Co.'s Quality Assurance project) and the World Bank on human resources and the health workforce, in order to compile a matrix that covered information on specific studies carried out for each country, in addition to the main recommendations and findings from each of the studies. This matrix was shared with Ishrat Husain and Estelle Quain (from OGAC), and was provided to reviewers of the President's Emergency Plan for AIDS Relief five-year Country Operational Plan.

Dissemination and Advocacy

Orphans and Vulnerable Children: State-of-the-Science Paper

SARA hired a consultant, Ms. Isolde Birdthistle, to draft a background paper for the OVC Consultative Meeting held in November 2003. This review was carried out to summarize the findings that represent the most current understanding (i.e., the state-of-the-art) of children's vulnerability due to AIDS, in order to:

- ◆ Capture what is known and not yet known about the impact of HIV/AIDS on the survival, health, education, social, and emotional needs of children;
- ◆ Identify the content gaps and methodological limitations of existing analysis;
- ◆ Suggest priorities for future analysis; and
- ◆ Inform programmatic and political responses.

The review is intended for researchers, knowledgeable practitioners, NGOs, international aid agencies, policy advisors, and others who are in a position to use the findings to design and direct programs, allocate resources, and expand the coverage of support for affected children.

This document was distributed widely in draft at the OVC Technical Consultation and revised based on comments received in April 2004. When Peter Salama took over from Peter McDermott as the AFR/SD HIV/AIDS advisor, he requested Ms. Bery to seek other comments to try to strengthen the health and food security and emotional well-being sections. Ms. Bery received comments from Ms. Sykes in Au-

gust and from Alexandra Yuster at UNICEF in early October. These will be incorporated and the final document shared with AFR/SD by early November.

Orphans and Vulnerable Children Technical Consultation

SARA worked closely with Peter McDermott and Linda Sussman to organize and host this large technical consultation which was held November 2003. Africa Bureau was very pleased with the results, as were participants who indicated that it was a very valuable meeting. This is described in more detail in the dissemination and advocacy section of this report.

Stigma Toolkit and Stigma Video

Ms. Sykes took the lead in reviewing and adapting the HIV Stigma Toolkit for use in Francophone countries. Ms. Sykes is working with Publications Coordinator Raymond Lambert to ensure appropriate adaptation and translation of the toolkit. The toolkit will be translated into French by the end of October and will be produced and disseminated in early 2005. SARA also organized dissemination of the English version of the Stigma toolkit to 165 institutions throughout Africa. The toolkit was sent out with a video entitled “Women in Mali: AIDS and Hope” which addresses the issue of stigma for PLWHA, particularly for women. Many African institutions acknowledged, with great appreciation, that they had received the toolkit and video.

African Institutions

CRHCS/ECSA

Regional Health Ministers Conference

In November 2003, the Regional Health Ministers Conference was held in Livingstone, Zambia. The central theme of the Conference was “Strengthening and scaling up health interventions in ECSA: The central role of human resources for health.” SARA Senior HIV/AIDS Advisor Dr. Stephen Kinoti gave presentations and assisted in presenting on the “Impact of HIV/AIDS on the Health Workforce in Kenya and Malawi.” The results from Kenya and Malawi showed increased disease burden and strained health systems as a result of HIV/AIDS, high health workforce attrition rates due to death, early resignation and staff leaving MOH services (particularly clinical to non-clinical services), a high proportion of unfilled posts, high absenteeism, and low morale among workers and other related findings. The ministerial participation was very strong, with the ministers themselves making presentations on issues of health workforce and scaling-up of HIV/AIDS responses. Countries represented were Kenya, Lesotho, Malawi, Mauritius, Mozambique, Seychelles, Swaziland, Tanzania, Uganda, Zambia, and Zimbabwe. Regional and international agencies present included WHO/AFRO, WHO/Geneva, New Partnership for Africa’s Development (NEPAD), REDSO, DFID,

HIV/AIDS Prevention and Mitigation

SARA, and MSH. A whole session was dedicated to the impact of HIV/AIDS on the health workforce.

Although the position of ECSA-HIV/AIDS Coordinator was vacant throughout most of 2004, (January through July), Ms. Sykes worked with Reproductive Health Coordinator Dr. Achola Ominde and AIDS Program Assistant Jennifer Kaahwa to move certain HIV/AIDS activities forward. In June 2004, Ms. Sykes worked with the ECSA team in Tanzania on the key activities including preservice training on HIV/AIDS, policy monitoring, and the health workforce assessments. Ms. Sykes also had the opportunity to meet with the entire ECSA staff.

Review of Kenya Human Resources Report

Ms. Sykes met with Lawrence Mwikya, a member of the Kenya assessment team from the MOH, to discuss questions related to the data presented in the Kenya report. Several of the outstanding questions related to the data were clarified, and it was decided that some data would be revisited for further clarification upon his return to Kenya.

HIV/AIDS Preservice Training

Ms. Sykes met with Jennifer Kaahwa and Olive Mujanja. Five countries have received funding to carry out an assessment of HIV/AIDS for the different clinical disciplines. Lesotho has submitted a report with the status of activities. Through e-mail and telephone calls, Jennifer has gathered some information regarding where the other three countries stand. Ms. Sykes shared with ECSA a proposed monitoring tool for tracking the progress of the preservice training curricula activity. The tool was developed based on the country work plans developed by each of the countries during the Lesotho workshop.

Policy and Advocacy Monitoring

Ms. Mujanja has been the primary person responsible for this activity. Countries were asked to carry out a current and retroactive situation analysis on health policies established in their countries over the last three years. The four countries that have submitted reports on the policy include Mauritius, Seychelles, Swaziland and Zimbabwe. Kenya and Malawi have had issues that have delayed them from carrying out the situational analysis. These issues are related to staff turnover (Malawi) and time constraints/workload (Kenya). Lesotho has also carried out similar activity. Subregional workshops were planned to review the reports and to establish a mechanism to continually monitor the policies and to set up a policy and advocacy strategy. The subregional workshops were planned last year. Although there was initial funding for them, the support was later pulled.

NAP+

SARA continued to support NAP+ activities in promoting communication (e.g., the “Positive Voice” newsletter), supporting greater involvement of people living

with HIV/AIDS, and tackling stigma (Ambassadors for Hope toolkit). SARA also supported several of NAP+'s meeting, such as their midterm review and board meetings.

Ms. Sykes arranged for NAP+ Program Officer Dorothy Odhiambo to attend the Economic Strengthening for OVC meeting in Tanzania. NAP+ has recently started working with Hope for African Children Initiative (HACI), an initiative that focuses on programs for orphans and vulnerable children. An important strategy for addressing the increasing numbers of orphans is to provide support, care, and treatment for parents living with HIV/AIDS.

CERPOD

Under the SARA subcontract, CERPOD procured the services of Dr. Idrissa Ouedraogo of Burkina Faso to restart the HIV/AIDS implementation activities interrupted last year when key technical persons departed after the reorganization of CERPOD and the subsequent departure of HIV/AIDS Consultant David Ojaka. Dr. Ouedraogo carried out a rapid assessment of HIV/AIDS monitoring and evaluation (M&E) and management capacity in selected West Africa countries (Burkina Faso, Cape Verde, Gambia, Mali, and Senegal). The assessment was part of a subregional activity jointly organized by USAID's West Africa Regional Program, FHI, WAHO, UNAIDS, CERPOD, and the MEASURE Evaluation Project. The findings of the assessment were used to better prepare and inform a multi-county regional meeting held in November 2003 in Dakar to discuss capacity development needs to improve the M&E of national AIDS control programs. CERPOD produced and disseminated a summary report of the five-country assessment. CERPOD will also use these findings to develop proposals and better plan technical support to countries on HIV/AIDS M&E.

WAHO

SARA continued to assist WAHO in its effort to marshal a subregional plan to address HIV/AIDS in the military. Dr. Duale provided technical support for planning and served as a resource person at a WAHO-sponsored workshop for Joint Chiefs of Staff and Directors of Medical Services of ECOWAS member country armed forces on updating and validating a subregional proposal for strengthening HIV/AIDS prevention and control in the military, especially during peace missions. The workshop was held in Accra, Ghana, in February 2004. It was recommended that the updated and validated proposal be packaged for submission to the ECOWAS Security Council, the U.S. Department of Defense, the Global Fund to Fight AIDS, Tuberculosis and Malaria, and other potential donors for funding.

When WAHO Deputy Director General Professor Moussa Maiga spent a week in Washington, DC, Dr. Duale assisted him in arranging meetings with interested parties at the Pentagon, NIH/NIAID, USAID, World Bank, Clinton Foundation, and FHI to discuss WAHO's strategic plan for addressing HIV/AIDS in the ECOWAS

HIV/AIDS Prevention and Mitigation

region. A number of areas of potential collaboration between WAHO and the organizations contacted were identified.

WAHO requested that Dr. Duale join a team of resource persons at a subregional workshop to create consensus among the country coordinating mechanisms (CCMs) on leadership for preparing regional ECOWAS proposals to GFATM. The workshop was held March 29-31, 2004 in Dakar, Senegal. The meeting was cosponsored by WAHO and its partners USAID/WARP, AWARE-HIV/AIDS Project, UNAIDS, and Tulane University. Participants at the meeting included representatives of the CCMs of ECOWAS Member States—Benin, Burkina Faso, Cape Verde, Côte d'Ivoire, The Gambia, Ghana, Guinea, Guinea Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone, and Togo. Participants at the meeting also came from WAHO and its partners AWARE-HIV/AIDS project, Tulane University, USAID/WARP, Réseau Africain des personnes vivant avec le VIH/SIDA (RAP+), Stop SIDA, the West African Network of AIDS Service Organizations, and ECOWAS Armed Forces. Dr. Duale provided technical input and was part of small team that worked after the workshop to finalize a proposal submitted for Round 4 of the GFATM. Unfortunately the proposal was not funded, despite having received a good review.

WARP

In September, Agnieszka Sykes met with the WARP HIV/AIDS team. Both James Browder and Mr. Sosthène Bucyana had recently joined the WARP office based in Accra. Ms. Sykes informed WARP of the HIV/AIDS activities that SARA is carrying out with support from USAID's Africa Bureau.

Prevention of Mother-to-Child Transmission of HIV

Mr. Bucyana is particularly interested in PMTCT, and some work is actually being supported by the AWARE-RH project. AWARE-RH project is covering PMTCT through the support of Cameroonian Baptist Organization's activities as a model for "better practices." One of the areas that AWARE-RH would like to promote is the use of client-oriented, provider-efficient services (COPE) within the context of PMTCT.

African NGO Training in AIDS BCC

Since AWARE-AIDS has a mandate to build the capacity of African institutions, Ms. Sykes shared information about her experiences working closely with Groupe Vie Saine/Group Healthy Life—a training organization based in Guinea that has a unique approach to HIV/AIDS behavior change communication and life skills. James Browder expressed interest in this group and their potential to expand regionally.

Materials Left with WARP

- ◆ *Scenarios from the Sabel video (French & Portuguese);*

- ◆ *Temoignage de Femmes, SIDA et Espoir au Mali* video (French with English subtitles);
- ◆ Stigma toolkit (English); and
- ◆ Groupe Vie Saine training curriculum (French).

Illustrative Results

- ◆ An economic strengthening for orphans and vulnerable children network was established to focus on specific actions in order to promote scaling up of economic strengthening for OVC programs. So, far working groups within the network were able to:
 - Identify potential areas of collaboration with the Hope for African Children's Initiative (HACI) on tool/document needs assessments; and
 - Develop a proposal for research needs.
- ◆ AFR/SD, through SARA, produced a SOTA paper on OVC.
- ◆ SARA staff presented the results from Kenya and Malawi health workforce assessments at the November 2003 ESCA Regional Health Ministers Conference.
- ◆ The report *Challenges the Health Workforce is Facing in the Era of HIV/AIDS (Kenya and Malawi)* was repackaged as two country assessment reports and summary briefs in order to serve as the basis for key stakeholder workshop meetings in Kenya and Malawi.
- ◆ As a result of great demand for the HIV/AIDS stigma toolkit, SARA disseminated the stigma toolkit on CD-ROM to 50 African organizations and the video on stigma entitled "Malian Women Speaking Out" to 165 African organizations.
- ◆ NAP+ increased knowledge among networks of PLWHA by sharing information on mitigating stigma and the latest information on ARV treatment through distribution of its newsletter, "Positive Voice." NAP+ identified key program areas and priorities during both the midterm review and board meeting.
- ◆ CERPOD used findings of the rapid assessment of the HIV/AIDS program M&E to position the institution to leverage resources for support of M&E capacity in selected West Africa countries.
- ◆ A WAHO proposal for strengthening HIV/AIDS prevention and control in the military of ECOWAS member countries was accepted by U.S. Department of Defense for potential funding in the next fiscal year.

F. Crosscutting Issues

Joint Review of USAID and DFID Grants to the World Health Organization/Africa Regional Office for African Disease Control for the 1999 to 2003 Period

SARA Senior Child Survival Specialist Dr. Martita Marx, SARA Senior Analysis Manager and Infectious Disease Advisor Dr. Sambe Duale, and a senior program analyst/evaluation specialist recruited by the POPTECH project worked in consultation with staff from USAID/AFR/SD, WHO/AFRO, and DFID to plan and conduct the review of USAID and DFID grants to WHO/AFRO for disease control from 1999 to 2003. The review consisted of an exhaustive desk review; focused on-site interviews in Harare with regional advisors, unit heads, and technical and program staff from the Division of Communicable Disease and Prevention and Control and the Division of Family and Reproductive Health; and self-assessment questionnaires completed by WHO/AFRO staff at intercountry and country levels. A three-day joint WHO/AFRO, USAID, and DFID review workshop was held in Harare, Zimbabwe in March 2004 to:

- ◆ Share and discuss the preliminary findings of the grant review;
- ◆ Conduct an analysis of the strengths, weaknesses, opportunities of and threats of WHO/AFRO in each programmatic area;
- ◆ Identify priority technical and managerial issues for future grant development; and
- ◆ Develop recommendations and next steps to finalize the review report, the plans for 2004/2005, and the preparation of the next USAID grant agreement.

SARA staff worked on producing the final report of the review.

Advocacy Support on Addressing the Health Workforce Crisis in Africa

Dr. Duale prepared a paper entitled *The Health Workforce Crisis in Africa: Dimensions and Illustrative Immediate and Long-Term Responses*. This paper outlines the crisis and reviews illustrative short-term responses and long-term measures to be considered in addressing it. The paper was intended to inform the discussion during the Health Manpower Crisis in Africa session at the June 2004 USAID SOTA course for its HPN staff in Africa. The course took place in Johannesburg, South Africa. SARA also contracted the services of two human resource experts, Mr. Seth Acquah of Ghana and Mr. Tim Martineau of the U.K., to present at the SOTA conference. At AFR/SD's request, Mr. Martineau also developed a paper on the options for increasing the staffing of HIV/AIDS programs in Africa.

Consultative Meeting on Public Health Education Capacity in Africa

Dr. Duale joined Professor Carel Ijsselmuiden, the AfriHealth project manager and the designated executive secretary for COHRED, for a meeting with USAID colleagues in October 2003 to discuss public health capacity and training issues in

Africa. Following the meeting, SARA was asked to work with AfriHealth to organize a consultative meeting on public health training capacity in Africa. The rationale for the consultation was to engage emerging African public health leadership in discussing future capacity building initiatives aimed at Africa.

A Consultative Meeting on Partnerships for Strengthening Public Health Education Capacity in Africa was held in April 2004, at the School of Health Systems and Public Health of the University of Pretoria, South Africa. The meeting was co-organized by AfriHealth (a Rockefeller Foundation-funded research program at the School of Health Systems and Public Health of the University of Pretoria) and COHRED (a Geneva-based NGO whose mission is to help build capacity for health research for development). Sambe Duale worked with Carel Ijsselmuiden of COHRED and Dr. Thomas Nchinda, a COHRED/AfriHealth consultant, to plan and organize the meeting. The final report of the meeting established a set of guiding principles for “good practice” when developing partnerships with African public health training and research institutions. USAID considered the meeting outcomes in designing a strategy and activities to develop public health leadership in Africa. SARA will work with COHRED to disseminate the meeting report widely.

G. *Management*

SARA Operations Staff:

Joseph Coblentz, Operations Manager, AED
Jose Molina, Program Officer for Operations, AED
Amy Kushner, Program Assistant for Operations, AED
Margarita Torres, Financial Manager (60% time), AED

Ongoing SARA Management Activities

SARA operations staff have continued to provide support to AFR/SD and SARA activities in the areas of coordinating travel and meeting logistics and providing daily liaison between SARA staff and AED's accounting, contracts, human resources, and billing departments, ensuring timely reporting and submission of contract deliverables. The SARA operations manager has also been in regular contact with our CTO and her colleagues to ensure SARA responsiveness to Africa Bureau needs. In addition, the operations manager assisted the project director in ensuring appropriate responses to strategic issues raised in project implementation and compliance with the contract. Among these were strategies for ensuring that AFR/SD's requests for specific assistance can be met within AED's and USAID's contracting procedures.

Overall Operations

SARA operations staff processed the following this year:

- ◆ Annual SARA work plan;
- ◆ 66 CTO letters;
- ◆ 16 purchase orders with U.S., Canadian, and African organizations and firms;
- ◆ 8 consultants who provided about 14 person-months of short-term technical assistance;
- ◆ Travel of about 30 staff, consultants, and African meeting participants;
- ◆ Periodic requests from AFR/SD for funding committed under various strategic objectives and other earmarks; and
- ◆ Quarterly pipelines for AFR/SD in response to USAID/Office of Procurement requests as monitoring tool for drawdown on obligations.

This was a productive year for operations staff. Staff was stable with no change in personnel. As a result of this support, all processes were carried out on time and with maximum efficiency. This year, the operations manager continued to delegate certain tasks to the program officer for operations, and he to the program assistant, such that tasks were balanced. This in turn allowed operations staff to improve further on all systems. Finally, the operations manager and financial manager enhanced financial reporting and tracking systems such that SARA will be able to ensure an orderly close-out in FY 2005.

Management

Project Reporting

SARA operations staff continued its timely submission of quarterly progress and financial reports. In addition, as reported above, the operations manager improved on the tracking system for expenditures by strategic objective and provided a report at various times. This year, SO20 and SO21 requested frequent financial updates. This resulted in SARA's production of a more refined updating instrument for their purposes. In addition, the operations manager and financial manager developed a level of effort (LOE) tracking system to ensure that SARA stays below our LOE ceiling.

Development of Subcontracts

During the fifth project year, the Tulane, PRB, NAP+, CERPOD, and CRHCS/ ECSA subcontracts continued. Operations team support consisted of ensuring that invoices, requests for approval of consultants, and progress and financial reports were submitted and circulated to the right AED staff for comment and follow-up. Operations staff also facilitated an additional funding obligation to ECSA and work plan revision for both CERPOD and ECSA during the year. Operations staff also assisted NAP+ in concluding its subcontract by facilitating reporting and final payments.

With respect to African institutions, in addition to managing the long-term subcontracts with NAP+, CERPOD, and CRHCS, SARA negotiated small subcontracts with organizations such as WAHO, CEFORP, the University of Ghana, and ZVITAMBO.

Other SARA Operations Highlights

SARA operations staff carried out the following additional activities:

- ◆ Provided specific guidance to African institutions on how to meet USAID and AED administrative and contractual requirements, including extension of existing subcontracts;
- ◆ Assisted AFR/SD in preparing for seven SARA management meetings; and
- ◆ Assisted the AED contracts department in finalizing scopes of work and budgets for new subcontracts and revised scopes of work for a few older ones.

Conclusion

SARA operations staff continues to keep up with project travel and meeting logistical requirements, report regularly, monitor expenditures, and project future expenditures. In the last year of the project, operations staff hopes to document some of the lessons learned from the experience in monitoring a complex project for future AED use.

Appendix A

Dissemination/Publications List

Dissemination/Publications List

SARA II Project Publications (Year 5)

Child Survival

Malaria

USAID Malaria Programs in Africa: 1998-2003

USAID/AFR/SD, USAID/GH, PHNIP, and SARA Project/AED (Washington, DC: April 2004).

Tuberculosis

Tuberculosis and Gender: A Pilot Study in Tanzania

J. Nguma, E. Wandwalo, and S. Egwaga; USAID/AFR/SD, Healthscope TZ, and SARA Project/AED (Washington, DC: September 2004)

IDSR

Technical Meeting on the Implementation of Core Indicators for the Integrated Disease Surveillance and Response in the Africa Region

CDC, WHO, HHS, USAID, SARA Project/AED, and UN Foundation (Atlanta: March 2004)

Other

The Health Workforce Crisis in Africa: Dimensions and Illustrative Immediate and Long-Term Responses

USAID/AFR/SD; SARA Project/AED (Washington, DC: June 2004)

Child Health Financing and Cost-Effectiveness: Supplement to the Report on the Analytic Review of IMCI

USAID/AFR/SD; SARA Project (Washington, DC: 2003)

Child Survival in Sub-Saharan Africa—Taking Stock: Overview of Findings and Recommendations

USAID/AFR/SD; SARA Project/AED (Washington, DC: September 2004)

Reproductive Health and Family Planning

Best Practices from West and Central Africa 1995-2003: CD-ROM Family Health and AIDS, Project, USAID/West Africa Regional Program [CD-ROM]

SFPS Unified Management Team, JHPIEGO, FHI, JHUCCP, PSI, Tulane University, and SARA Project/AED. (Baltimore, MD: February 2004)

Appendix A—Dissemination/Publications List

Issues in Postabortion Care: Scaling-Up Services in Francophone Africa

Postabortion Care (PAC) Initiative for Francophone Africa Committee; USAID/AFR/SD; SARA/AED (Washington, DC: June 2004) 88 pp. Also in French (Washington, DC: August 2004) 88 pp.

Questions aux soins après avortement : extension des services en Afrique francophone

Postabortion Care (PAC) Initiative for Francophone Africa Committee; USAID/AFR/SD; SARA/AED (Washington, DC: August 2004)

HIV/AIDS

Building Public Private Partnerships to Address HIV/AIDS, A Work in Progress

USAID/AFR/SD, USAID/Nigeria, SARA Project/AED (Washington, DC: December 2003)

Challenges Facing the Kenyan Health Workforce in the Era of HIV/AIDS

USAID/AFR/SD, ECSA, and SARA Project/AED (Washington, DC: September 2004)
(also accompanying brief)

Challenges Facing the Malawian Health Workforce in the Era of HIV/AIDS

USAID/AFR/SD, ECSA, and SARA Project/AED (Washington, DC: September 2004)
(also accompanying brief)

Economic Strengthening to Improve the Well-Being of Orphans and Vulnerable Children, Workshop Report, June 14-16, 2004, Dar es Salaam, Tanzania

USAID/AFR/SD and SARA Project/AED (Washington, DC: September 2004)

Key Documents on Orphans and Vulnerable Children (vol. 1) [CD-ROM]

USAID/AFR/SD and SARA Project/AED (Washington, DC: April 2004)

Key Documents on Orphans and Vulnerable Children (vol. 2) [CD-ROM]

USAID/AFR/SD and SARA Project/AED (Washington, DC: July 2004)

Orphans and Vulnerable Children Technical Consultation, Meeting Report, November 3-5, 2003

USAID, Bureau for Africa, Office of Sustainable Development and Bureau for Global Health; SARA Project/AED; Synergy Project/Social & Scientific Systems (Washington, DC: April 2004).

Orphans and Vulnerable Children Technical Consultation, Collected Meeting Materials [CD-ROM]

USAID/AFR/SD; SARA Project/AED (Washington, DC: November 2003)

USAID HIV/AIDS Documents [CD-ROM]

USAID; SARA Project/AED (Washington: March 2004)

Crosscutting

Des vies menacées : le paludisme pendant la grossesse (nouvelle édition)

Roll Back Malaria, Malaria in Pregnancy Working Group; USAID/AFR/SD; SARA Project/ AED. (Washington, DC: December 2003)

Key Nutrition and HIV/AIDS Publications for 9th ECOWAS Nutrition Forum [CD-ROM]

USAID/AFR/SD; SARA Project/AED (Washington, DC: September 2004)

Reproductive Health and Disease Control in Africa: A Joint Review of USAID's Africa Bureau and DFID Grants to WHO/AFRO, 1999-2003

USAID/AFR/SD and SARA Project/AED (Washington, DC: September 2004)

Nutrition and HIV/AIDS: A Training Manual

Regional Centre for Quality of Health Care (RCQHC); USAID/REDSO/ESA; USAID/AFR/SD; USAID/GH; FANTA Project; LINKAGES Project; SARA Project/AED. (Kampala, Uganda: October 2003)

Nutrition and HIV/AIDS: Evidence, Gaps, and Priority Actions

USAID; SARA and FANTA Projects, AED (Washington, DC: May 2004)

Nutrition et VIH/SIDA: faits, lacunes, et mesures prioritaires

USAID; SARA and FANTA Projects, AED (Washington, DC: June 2004)

Providing Nutritional Care and Support for People Living with HIV/AIDS: Guidelines for Policy Makers and Programme Managers in the African Region

World Health Organization; Commonwealth Regional Health Community Secretariat for East, Central and Southern Africa; USAID/AFR/SD; and SARA Project/AED (Nairobi: November 2003)

Provision and Use of Family Planning in the Context of HIV/AIDS in Kenya: Perspectives of Providers, Family Planning and Antenatal Care Clients and HIV-Positive Women

W. Gichuhi and S. Bradley, Policy Project and SARA Project, AED, USAID/AFR/SD (Washington, DC: March 2004)

Provision and Use of Family Planning in the Context of HIV/AIDS in Zambia: Perspectives of Providers, Family Planning and Antenatal Care Clients and HIV-Positive Women

H. Banda, S. Bradley and K. Hardee, Policy Project and SARA Project, AED, USAID/AFR/SD (Washington DC: February 2004)

SARA II Annual Report: Project Year 4 (FY 03)

USAID/AFR/SD; SARA Project/AED (Washington, DC: January 2004)

SARA FY 2004 Trip Reports

Joint Malaria and IMCI Task Force Meeting. Harare, Zimbabwe. September 23-26, 2003. Suzanne Prysor-Jones.

Consultation of the Joint Learning Initiative on Human Resources for Health African Working Group. Accra, Ghana. September 29 – October 2, 2003. Stephen Kinoti.

Annual Meeting of the West African Network for the Prevention and Treatment of Malaria in Pregnancy (RAOPAG), and Work with CERPOD. Cotonou, Benin and Bamako, Mali. October 7-18, 2003. Holley Stewart.

Global Consultation on Strengthening National Capacities for Surveillance, Response and Control of Communicable Diseases. Geneva, Switzerland. October 20-24, 2003. Sambe Duale and Antonia Wolff.

WHO/AFRO 2003 Reproductive Health Task Force and Visit to Senegal Mission and Child Health Programs. Dakar, Senegal. October 20 – November 1, 2003. Suzanne Prysor-Jones.

Workshop on the Development of a Sub-regional Strategy for the Reduction of Maternal and Perinatal Morbidity and Mortality. Accra, Ghana. November 9-16, 2003. Holley Stewart.

Impact of HIV/AIDS on Health Workforce in Kenya and Malawi. Lilongwe, Malawi and Livingston, Zambia. November 9-22, 2003. Stephen Kinoti.

Participation in WHO Technical Meetings on HIV, Infant Feeding and Nutrition. Geneva, Switzerland; Durban, South Africa. November 10-22, 2003. Ellen Piwoz.

Technical Assistance to WHO/AFRO on Dissemination. Harare, Zimbabwe. November 15-21, 2003. Antonia Wolff.

Presentation of Preliminary Results of the ZVITAMBO Trial on HIV and Infant Feeding. Harare, Zimbabwe. December 12-15, 2003. Ellen Piwoz.

Preliminary Visits to Mali and Senegal to Plan for Two Capacity Building Workshops in Nutrition for NGOs. Bamako, Mali and Dakar, Senegal. December 14-23, 2003. Kinday Samba.

WAHO-sponsored Workshop to Validate a Regional Framework and to Prepare the 2004-2006 Action Plan for Addressing HIV/AIDS in the Armed Forces of ECOWAS Countries. Accra, Ghana. February 9-13, 2004. Sambe Duale.

Development of Regional Partners' Road Map to Maternal and Newborn Health for Sub-Saharan Africa. Harare, Zimbabwe. February 16-18, 2004. Holley Stewart.

Healthy Newborn Partnership Meeting and Planning for the Private Sector for Child Health and Malaria Steering Committee Meeting. Addis Ababa, Ethiopia and London, England. February 23-27, 2004. Suzanne Prysor-Jones.

Review of USAID/DFID Grants to WHO/AFRO for African Disease Control (1999-2003). Harare, Zimbabwe. March 2-12, 2004. Martita Marx.

Participation in WHO Informal Meeting on Recommendations for Feeding the Non-breastfed Child 6-24 Months of Age. Geneva, Switzerland. March 6-11, 2004. Ellen Piwoz.

Review of USAID/DFID Grants to WHO/AFRO for African Disease Control (1999-2003) and IDSR Indicator Technical Review Meeting. Harare, Zimbabwe and Atlanta, Georgia, USA. March 8-12, 2004. Sambe Duale.

WHO/CAH Informal Consultation on the Evidence on Child Health Behaviors and Private Sector Forum Steering Committee Meeting. Geneva, Switzerland, and London, United Kingdom. March 29 – April 2, 2004. Suzanne Prysor-Jones.

Mali REDUCE/ALIVE Workshop, and Advocacy Dissemination Work Planning on Adolescent Reproductive Health with CERPOD. Fana and Bambako, Mali. March 29 – April 9, 2004. Holley Stewart.

Consultative Meeting on Partnerships for Strengthening Public Health Education Capacity in Africa, and a Sub-regional Workshop on a Regional Coordinating Mechanism. Pretoria, South Africa and Dakar, Senegal. April 5-8, 2004. Sambe Duale.

Safe Motherhood and Newborn Health Partnership Consultative Group on Advocacy. London, United Kingdom. May 10-12, 2004. Suzanne Prysor-Jones.

Participation in SOTA 2004. Johannesburg, South Africa. June 7-14, 2004. Ellen Piwoz.

5th Integrated Disease Surveillance and Response Strategy (IDSR) Task Force Meeting. Harare, Zimbabwe. June 14-18, 2004. Sambe Duale.

Economic Strengthening for OVC Workshop and Technical Visit to CRHCS. Dar es Salaam and Arusha, Tanzania. June 14-24, 2004. Agnieszka Sykes.

Technical Review Meeting on the Monitoring and Evaluation Protocol and Global Indicator Database for Communicable Disease Surveillance and Response. Geneva, Switzerland. July 7-9, 2004. Sambe Duale.

Francophone Inter-country Meeting of IMCI Focal Points. Ouagadougou, Burkina Faso. July 12-16, 2004. Martita Marx.

Development of WHO/AFRO Proposal to USAID on Formative Research on Community Newborn and Maternal Care. Johannesburg, South Africa. July 14-17, 2004. Nancy Nachbar and Holley Stewart.

Appendix A—Dissemination/Publications List

Participation in USAID/Mozambique Assessment to Integrate Nutrition and Food Interventions into HIV/AIDS Prevention, Treatment and Care Programming. Maputo, Mozambique. August 5-13, 2004. Ellen Piwoz.

Development of an ECSA Health Community Communication Strategy. Arusha, Tanzania. September 16-24, 2004. Renuka Bery.

Meeting with WARP-HIV/AIDS. Accra, Ghana. September 27, 2004. Agnieszka Sykes.

Appendix B

List of Deliverables over the Life of the Project

TABLE 1. List of Deliverables over the Life of the Project

* Target and Actual figures reported for each project year represent the number achieved that year, with cumulative figures reported at the far right.

DELIVERABLE	YEAR 1		YEAR 2		YEAR 3		YEAR 4		YEAR 5		CUMULATIVE TOTAL	
	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual	Target	Actual
A. Issues Identification and Consultations												
1. Issues identification and discussion meetings	3	5	3	2	3	8	3	6	3	3	15	24
2. Consultative group meetings held	4	7	4	6	4	5	4	10	4	2	20	30
B. Dissemination and Advocacy												
1. Major documents or technical reports (30-100 pages) published	6	6	6	12	6	12	6	4	6	12	30	46
2. Special bulletins, brochures and packets produced for target groups	10	22	10	13	10	6	10	8	10	8	50	57
3. Number of documents that are translated into second languages		19		10		5		8		5		47
C. African Partnerships and Capacity Building												
1. Number of African organizations/networks with whom SARA has undertaken major collaborative research, analysis, and/or dissemination and advocacy activities in support of AFR/SD/HRD SOs	2	8	2	16	1	0	0	4	0	1	5	29
2. Number of functioning partnerships established between U.S. private institutions and African organizations	0	1	1	0	2	2	0	2	0	1	3	6
D. Monitoring and Evaluation												
1. Annual work plan developed on time	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A
2. System established for tracking SARA activities, LOE and expenditures	Yes	Yes	N/A		N/A		N/A		N/A		N/A	N/A
3. Quarterly performance monitoring reports prepared (<i>last quarter is part of annual report</i>)	3	3	3	3	3	3	3	3	3	3	15	15
4. Annual report produced and distributed to USAID	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes		N/A	N/A
5. Technical support provided for developing and maintaining the AFR/SD/HRD monitoring and tracking system	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	N/A	N/A

List of Deliverables over the Life of the Project

Issues Identification and Discussion Meetings (approximately 15)

1)	Electronic Networking in ECSA (CRHCS meeting)	The Seychelles	Oct. 1999
2)	Behavior Change for Child Survival: lessons learned and best practices (a joint SARA/CHANGE meeting)	Washington, DC	Feb. 2000
3)	WHO/AFRO Health Systems Research for HIV/AIDS	Pretoria, S.A.	Mar. 2000
4)	Education in Countries in Crisis (AFR/SD meeting)	Washington, DC	Mar. 2000
5)	Nutrition in Africa Cooperating Agencies (AFR/SD meeting)	Washington, DC	Jul. 2000
6)	Multi-donor meeting on research on the new role of NGOs in basic education in Africa	Washington, DC	Jan. 2001
7)	Education in Countries in Crisis	Washington, DC	Sep. 2001
8)	Advance Africa Meeting on Best Practices	Washington, DC	Oct. 2001
9)	Issues in Maternal Mortality Measurement	Washington, DC	Dec. 2001
10)	Postabortion Care in West Africa	Dakar, Senegal	Mar. 2002
11)	Nutrition Care and Support Satellite Workshop	Barcelona, Spain	Jul. 2002

Appendix B—List of Deliverables Over the Life of the Project

12)	Preconference Satellite Session on HCD	Barcelona, Spain	Jul. 2002
13)	ARV Issues at CRHCS/ECSA DJCC	Arusha, Tanzania	Jul. 2002
14)	IYF Meeting on HIV/AIDS	Nairobi, Kenya	Aug. 2002
15)	Alternative Education Track of Basic Education Exchange	Addis Ababa, Ethiopia	Sep. 2002
16)	Nutrition Advocacy	Accra, Ghana	Nov. 2002
17)	Best Practices in Maternal and Neonatal Health	Ougadougou, Burkina Faso	Mar. 2003
18)	HAPEC Meetings	Mauritius Arusha, Tanzania	Mar. 2003 Jul. 2003
19)	Models of Care and Treatment in Africa	Washington, DC	Jun. 2003
20)	Sullivan Summit (Malaria, Nutrition, and HIV)	Abuja, Nigeria	Jul. 2003
21)	Regional HIV/AIDS Policy Advisory Committee Meeting	Arusha, Tanzania	Jul. 2003
22)	Economic strengthening for OVC	Dar es Salaam, Tanzania	Jun. 2004
23)	OVC Technical Consultation	Washington, DC	Nov. 2003
24)	West Africa Nutrition Focal Points Meeting	Cotonou, Benin	Sep. 2004

Appendix B—List of Deliverables Over the Life of the Project

Consultative Meetings (approximately 20)

1)	CRHCS/ECSA DJCC consultation on responding to the HIV/AIDS crisis in ECSA	Arusha, Tanzania	Mar. 2000
2)	Commodities in Communities (Ensuring Appropriate Use of Essential Supplies for Child Health at the Community Level in Africa)	Washington, DC	May 2000
3)	Mother-to-Child Transmission strategy meetings	Washington, DC	Aug. 2000
4)	Health and Finance Ministers' Conference on mobilizing resources for an expanded response to the HIV/AIDS epidemic	Nairobi, Kenya	Aug. 2000
5)	Health Systems Research consultative meeting on using research to inform policy decisions	Harare, Zimbabwe	Sep. 2000
6)	Meeting of CTOs and CAs working in maternal health to discuss REDUCE model	Washington, DC	Sep. 2000
7)	West Africa Nutrition Focal Points Meeting	Bamako, Mali	Sep. 2000
8)	REDUCE presented to USAID SO 20 Maternal Health Group	Washington, DC	Oct. 2000
9)	Advocacy	Washington, DC	Nov. 2000
10)	CRHCS DJCC meeting, Strengthening Health Systems	Arusha, Tanzania	Mar. 2001

Appendix B—List of Deliverables Over the Life of the Project

11)	Maternal-to-child transmission of HIV	Washington, DC	Jun. 2001
12)	Malaria USAID Strategy Meeting	Washington, DC	Sep. 2001
13)	West Africa Nutrition Focal Points Meeting	Accra, Ghana	Sep. 2001
14)	USAID Debriefing of Findings from PMTCT conference in Kampala, Uganda	Washington, DC	Oct. 2001
15)	IMCI Interagency Working Group Meeting	Washington, DC	Nov. 2001
16)	NGO and Education Advisory Group Meeting	Washington, DC	Jan. 2002
17)	Multisectoral Approaches to HIV/AIDS	Washington, DC	Mar. 2002
18)	WAHO Meeting on HIV/AIDS in ECOWAS Armed Forces	Bamako, Mali	Apr. 2002
19)	PVO Multisectoral Meeting	Washington, DC	Oct. 2002
20)	Consultation with National AIDS Councils and National AIDS Control Programs facilitated by HAPAC to clarify roles and functions of each group	Kampala, Uganda	Nov. 2002
21)	Integrating PMTCT into Reproductive Health Services	Mauritius	Mar. 2003
22)	Regional NGO Meeting on Malaria (CORE)	Bamako, Mali	Jun. 2003
23)	Integrating Nutrition Tools into Preservice Training	Conakry, Guinea	Jun. 2003
24)	Private Practitioners for Child Health	Washington, DC	Jul. 2003

Appendix B—List of Deliverables Over the Life of the Project

25)	DJCC (Strengthening Human Resources for Health)	Arusha, Tanzania	Jul. 2003
26)	WHO Regional Maternal and Perinatal Strategy Framework Meeting	Bobo-Dioulasso, Burkina Faso	Jul. 2003
27)	TB and Gender Study Meeting	Arusha, Tanzania	Aug. 2003
28)	Nutrition Focal Points Meeting	Conakry, Guinea	Sep. 2003
29)	Steering committee for private sector and child health	London, UK	Jun. 2004
30)	Consultative meeting on strengthening public health training capacity in Africa through partnerships with U.S. schools	Pretoria, South Africa	Mar. 2004

Appendix B—List of Deliverables Over the Life of the Project

Major Documents (30-100 pages) (approximately 30)

<i>Name of Document</i>	<i>Date Published</i>
1) Improving Community Case Management of Childhood Malaria	Oct. 1999*
2) Qualitative Research for Improved Health Programs	Jan. 2000*
3) Partenariats pour le Changement et la Communication	May 2000*
4) Guidance to USAID Missions for the prevention of MTCT of HIV in Africa	Sep. 2000
5) Monitoring and Evaluation of Nutrition and Nutrition-Related Programmes	Sep. 2000*
6) Prévenir la Mortalité Maternelle par les Soins Obstétricaux d'Urgence	Sep. 2000
7) HIV/AIDS and Nutrition: A Review of the Literature and Recommendations for Nutritional Care and Support in Sub-Saharan Africa	Nov. 2000*
8) Africa Collection for Transition (ACT) Library 1.0: From Relief to Development Complex Emergencies and Disasters	Mar. 2001
9) Epidemic Preparedness and Response in Africa: An Epidemiological Block Approach. Summary Report.	Mar. 2001
10) Techniques Participatives pour le Développement des Programmes Communautaires: Tome 1 Manuel du Formateur	Mar. 2001*
11) Techniques Participatives pour le Développement des Programmes Communautaires: Tome 2 Livret du Participant	Mar. 2001*

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

12)	Prevention of Mother-to-Child Transmission of HIV in Africa: Practical Guidance for Programs	Jun. 2001*
13)	CEFOREP Etude de Cas, Benin	Jun. 2001
14)	CEFOREP Etude de Cas, Mali	Jun. 2001
15)	CEFOREP Etude de Cas, Burkina Faso	Jun. 2001
16)	CEFOREP Etude de Cas, Senegal	Jun. 2001
17)	Early Breastfeeding Cessation as an Option for Reducing Postnatal Transmission of HIV in Africa: Issues, Risks and Challenges	Aug. 2001
18)	Using Data to Improve Service Delivery: A Self-Evaluation Approach	Sep. 2001*
19)	Qualitative Research for Improved Health Programs	Nov. 2001*
20)	Le rôle des ONG dans l'éducation de base au Mali	Dec. 2001
21)	A Transnational View of Basic Education	Jan. 2002*
22)	USAID-DHHS Partnership for Health Review	Jan. 2002
23)	Utilizing the Potential of Formal and Informal Private Practitioners in Child Survival	Feb. 2002*
24)	USAID/DFID Review of IMCI in the African Region	Feb. 2002
25)	A Literature Review of Community Schools in Africa	Mar. 2002

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

26)	The Changing Roles of Non-Governmental Organizations in Education in Malawi	Mar. 2002
27)	Guide for Improving Health Policy Development and Monitoring	Mar. 2002
28)	A Guide to Research on Care-Seeking for Childhood Malaria	Apr. 2002
29)	Evolving Partnerships: NGOs in Education	Jul. 2002
30)	Meeting Report—The 2nd Multisectoral Meeting on Rethinking HIV/AIDS and Development: A Review of USAID's Progress in Africa	Oct. 2002
31)	The Health Sector Human Resource Crisis in Africa: An Issues Paper	Feb. 2003
32)	HIV/AIDS—A Humanitarian and Development Crisis: Addressing the Challenges for PVOs and NGOs in Africa, Conference Report	Apr. 2003
33)	Multisectoral Responses to HIV/AIDS: A Compendium of Promising Practices from Africa	Apr. 2003
34)	Implementing an Integrated Disease Surveillance and Response in Mali (Draft)	May 2003*
35)	Nutrition and HIV/AIDS: A Training Manual	Oct. 2003
36)	Providing Nutritional Care and Support for People Living with HIV/AIDS: Guidelines for People Living with HIV/AIDS	Nov. 2003
37)	Provision and Use of Family Planning in the Context of HIV/AIDS in Kenya: Perspectives of Providers, Family Planning and Antenatal Care Clients and HIV-Positive Women	Feb. 2004
38)	Provision and Use of Family Planning in the Context of HIV/AIDS in Zambia: Perspectives of Providers, Family Planning and Antenatal Care Clients and HIV-Positive Women	Feb. 2004

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

39)	Understanding the Needs of Orphans and Other Children Affected by HIV and AIDS in Africa: The State of the Science	Apr. 2004
40)	Orphans and Vulnerable Children Technical Consultation Meeting Report	Apr. 2004
41)	USAID Malaria Programs in Africa: 1998-2003	Apr. 2004
42)	Training Manual on the Implementation of the Essential Nutrition Actions for Health and Social Workers in Sub-Saharan Africa (French and English)	May 2004
43)	Economic Strengthening to Improve the Well-Being of Orphans and Vulnerable Children, Workshop Report, June 14-15, Dar es Salaam, Tanzania	Jun. 2004
44)	Issues in Postabortion Care : Scaling-Up Services in Francophone Africa	Jun. 2004*
45)	Child Survival in Sub-Saharan Africa—Taking Stock: Overview of Findings and Recommendations	Sep. 2004
46)	Joint Review of USAID and DFID Grants to WHO/AFRO for African Disease Control, 1999-2003	Sep. 2004

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

Information Synthesized and Repackaged (up to 20 pages) (approximately 50)

1) Nutrition Briefs	Oct. 1999
2) Family and Reproductive Health Programme Profile (with CRHCS)	Oct. 1999
3) Human Resources Development and Capacity Building Programme Profile (with CRHCS)	Oct. 1999
4) Food and Nutrition Programme Profile (with CRHCS)	Oct. 1999
5) Montreal Global Strategy meeting E-note	Oct. 1999
6) KEMRI E-note	Dec. 1999
7) Zambia E-note	Dec. 1999
8) Entre la Volonte de Dieu et les Contraintes de la Vie (CERPOD document)	Jan. 2000
9) HIV/AIDS E-note	Jan. 2000
10) HIV/AIDS E-note	Jan. 2000
11) IDS E-note	Mar. 2000
12) MAQ Bulletin: Maximizing Access to Quality of Services	Mar. 2000
13) The Costing of Community Maternal and Child Health Interventions	Mar. 2000
14) Mother-to-Child Transmission of HIV (E-note from Global Bureau to missions)	Apr. 2000

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

15)	Reproductive Health E-note	May 2000
16)	REDUCE Brochure	May 2000
17)	AFR/SD Publications List	May 2000
18)	Saving Children's Lives: The Economic Rationale for IMCI	May 2000*
19)	Durban Summary on MTCT	Jul. 2000
20)	Reducing the Threat of Infectious Diseases in Africa: Highlights from 1999	Aug. 2000
21)	Lives at Risk: Malaria and Pregnancy	Sep. 2000**
22)	Investments in Education	Sep. 2000
23)	News to Save Lives (Malaria and Pregnancy Press Kit)	Mar. 2001*
24)	MAQ Bulletin—Francophone MAQ Subcommittee Newsletter	Mar. 2001*
25)	Candlelight Memorial E-note	Apr. 2001
26)	Immunization E-note	Apr. 2001
27)	HIV and Nutrition Brief—East Africa	Aug. 2001
28)	HIV and Nutrition Brief—West Africa	Aug. 2001*
29)	Reproductive Health Briefing Packet	Aug. 2001*
30)	REDUCE E-note	Aug. 2001

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

31)	Women's Nutrition and HIV/AIDS in West Africa	Aug. 2001*
32)	OVC Newsletter Issue 1	Sep. 2001
33)	OVC Packet	Sep. 2001
34)	REDUCE Brochure (revised)	Sep. 2001
35)	ALIVE Brochure	Sep. 2001
36)	Kampala MTCT Debriefing	Oct. 2001
37)	Case Study on CRHCS/SARA Information Dissemination Center	Feb. 2002
38)	West Africa Nutrition Briefs—Linking Multiple Sectors	Jun. 2002*
39)	SANA Impact Reviews	Jul. 2002
40)	Laboratory Methods for the Diagnosis of Epidemic Dysentery, Cholera & Meningitis [CD-ROM]	May 2002*
41)	HIV/AIDS Multisectoral Toolkits [CD-ROM]	Jun. 2002
42)	PVO Multisectoral Conference Materials	Oct. 2003
43)	AGOA Conference Packets	Jan. 2003
44)	Repositioning Family Planning Brief	Jan. 2003*
45)	Partnerships in Education Packets	Jan. 2003*

* indicates translated into French

** indicates translated into French and Portuguese

Appendix B—List of Deliverables Over the Life of the Project

46)	RH Portfolio, 1996-2002 [CD-ROM]	Mar. 2003
47)	Malaria, Nutrition, and HIV/AIDS: Selected Materials for the Sullivan Summit	Jul. 2003
48)	Revised MIP brochure	Jul. 2003*
49)	IDSR Policy Briefs	Aug. 2003*
50)	OVC Technical Consultation conference packets	Nov. 2003
51)	Family Health and AIDS, Project, USAID/West Africa Regional Program: Best Practices from West and Central Africa 1995-2003. [CD-ROM]	Feb. 2004
52)	USAID HIV/AIDS Documents [CD-ROM]	Mar. 2004
53)	Nutrition and HIV/AIDS: Evidence, Gaps, and Priority Measures	Apr. 2004*
54)	Key Documents on Orphans and Vulnerable Children, I [CD-ROM]	Apr. 2004
55)	Key Documents on Orphans and Vulnerable Children, II [CD-ROM]	Jul. 2004
56)	Key Nutrition and HIV/AIDS Publications for 9 th ECOWAS Nutrition Forum	Sep. 2004
57)	Child Survival in Sub-Saharan Africa—Taking Stock: Overview of Findings and Recommendations	Sep. 2004

* indicates translated into French

** indicates translated into French and Portuguese

**Number of Agreements Signed with African Institutions for Collaborative Activities in the Following Areas:
Analysis, Dissemination and Advocacy, Capacity Building and Training (at least 4)**

Bolytrade	1.	April 15-December 15, 2000 (\$13,611)	
CEDHA	2.	January 22-February 28, 2001 (\$4,526.33)	
CEFOREP	3.	December 16, 1999-August 31, 2000 (\$27,974)	January 6-February 28, 2003 (\$4,600)
	4.	March 3-May 15, 2001 (\$2,975)	March 1-April 15, 2003 (\$3,100)
	5.	January 30-March 31, 2002 (\$18,200)	October 1, 2003-June 30, 2004 (\$34,415)
	6.	May 11-November 30, 2002 (\$21,745)	
CERPOD	7.	January 17-August 15, 2000 (\$17,520)	
	8.	January 15, 2001-June 30, 2004 (\$187,666)	
CRHCS	9.	February 7-March 15, 2000 (\$32,000)	
	10.	March 27-April 15, 2000 (\$13,147)	
	11.	November 27-December 15, 2000 (\$13,707)	
	12.	February 1, 2001-June 30, 2004 (\$713,824)	
ERNWACA	13.	September 25-November 24, 2000 (\$2,139)	
	14.	April 2-June 30, 2001 (\$7,765)	
	15.	August 1, 2001-July 31, 2003 (\$189,965)	
HealthScope	16.	January 1-April 15, 2001 (\$14,016)	
	17.	July 2-December 31, 2001 (\$64,773)	
NAP+	18.	July 11, 2001-July 10, 2002 (\$60,000)	
	19.	January 22-February 28, 2001 (\$35,336)	
	20.	January 1-March 31, 2004 (\$68,000)	
OCCGE	21.	September 20-30, 2000 (\$14,520)	
Regional Centre for Quality of Health Care (RCQHC), Makerere University	22.	July 1-August 31, 2000 (\$27,364)	
	23.	May 29-July 30, 2000 (\$19,760)	
SAGO	24.	November 13, 2000-January 31, 2001 (\$12,585)	
SGOB	25.	March 12-May 31, 2001 (\$13,340)	
SWAA	26.	June 5-October 31, 2003 (\$74,371)	
WAHO	27.	March 1-April 30, 2001 (\$11,435)	September 2-November 30, 2002 (\$21,775)
	28.	August 13-September 15, 2001 (\$7,757)	

Appendix B—List of Deliverables Over the Life of the Project

Appendix C

Subcontractors' Activities

Long-Term Subcontractors' Activities

Tulane University

In general, Tulane continued to provide overall analysis, monitoring and evaluation, and technical assistance oversight through key personnel Dr. Sambe Duale, SARA's Senior Monitoring and Evaluation and Infectious Diseases Specialist. Through Dr. Duale, Tulane also provided ongoing assistance to AFR/SD in the areas of malaria, tuberculosis and infectious diseases, and HIV/AIDS, the latter done in collaboration with the SARA HIV/AIDS Advisor. This includes Dr. Duale's participation in the AFR/SD infectious diseases and malaria core groups, and his as-needed technical support to other SO 19 and 21 core groups. Finally, Dr. Duale oversaw monitoring and evaluation activities in his capacity as SARA's Monitoring and Evaluation Specialist.

Dr. Sambe Duale

In early FY 04, Dr. Duale promoted the need to address HIV/AIDS in the ECOWAS armed forces by providing technical assistance to the West African Health Organisation (WAHO)-sponsored Workshop to Validate the Framework for Addressing HIV/AIDS in the Armed Forces of ECOWAS Countries, February 9-11, 2004, Accra, Ghana. Dr. Duale has been a leader in addressing the ongoing concern about the armed forces' role in spreading the HIV infection. Dr. Duale drafted a report of the meeting that discusses the meeting deliberations and recommendations for further activities to address HIV/AIDS in armed forces of ECOWAS countries.

In February, Dr. Duale oversaw SARA support for the Second Meeting of the Partnership for Integrated Vector Management (IVM) in Africa in Dakar, Senegal. The meeting's purpose was to promote the implementation of the Integrated Vector Management approach as a contribution to vector-borne disease control with particular emphasis on malaria. Dr. Duale worked with WHO/AFRO, USAID and EHP project colleagues to plan the workshop, including setting the agenda and selecting the six African participants to be sponsored by SARA. Again, Dr. Duale drafted a report of the meeting that summarizes the deliberations and discusses the recommendations and next steps.

In March, Dr. Duale oversaw and participated in a consultative meeting in Pretoria, South Africa, on Strengthening Public Health Training Capacity in Africa Through Partnerships with US Schools. Dr. Duale worked with Carel Ijsselmuiden, the current executive secretary of COHRED and the AfriHealth project manager, to plan the workshop, including setting the agenda and selecting the African participants. SARA funded the meeting for about 20 African participants through AfriHealth and supported the travel and participation of Dr. Duale at the consultative meeting.

As part of his monitoring and evaluation function, Dr. Duale has been the key counterpart to AFR/SD in monitoring their large grant to WHO/AFRO in

Appendix C—Subcontractors’ Activities

strengthening the latter’s capacity to fight infectious diseases. Dr. Duale was asked to coordinate a team to evaluate aspects of the current grant as it ended. He then helped AFR/SD organize the team, and then attended the team’s debriefing during their last week in order to share the information.

In early June, Dr. Duale oversaw part of SARA’s contribution to the annual USAID State-of-the-Art (SOTA) meeting. Dr. Duale’s participation involved providing support to the specialist in health workforce issues. With his support, SARA sponsored two resource people to present a special session on the health work force crisis in Africa as a result of the prevalence of HIV/AIDS. When AFR/SD asked one of these resource people to produce a paper on short-term measures for addressing the staffing shortages for HIV/AIDS programs in countries receiving assistance under the President’s Emergency Plan for HIV/AIDS Relief, as follow-up to the USAID SOTA meeting, Dr. Duale oversaw that effort as well.

In mid-June, Dr. Duale attended the 5th IDSR Task Force Meeting in Harare, Zimbabwe. The World Health Organization-Regional Office for Africa (WHO/AFRO), with support from USAID/AFR/SD and other partners, is involved in a major effort to implement a regional Integrated Disease Surveillance and Response (IDSR) Strategy in all member states. Recognizing the contribution of the SARA Project to the implementation of IDSR, WHO/AFRO invited Dr. Duale to attend the meeting. After the meeting, Dr. Duale submitted an excellent trip report that summarizes his discussions with WHO/AFRO colleagues and the outcomes of the meeting for consideration by SARA and AFR/SD for future activities.

Shortly thereafter in early July, Dr. Duale participated in the WHO technical review meeting of the draft protocol for monitoring and evaluation of national surveillance and response systems and the indicators for a Global Data Base in Geneva, Switzerland. Again, in recognition of Dr. Duale’s longtime association with the Regional IDSR strategy initiative, he was invited to provide technical assistance to the review of the protocol. His trip report summarizes his meetings with other participants and provides recommendations to AFR/SD and WHO for future action.

Population Reference Bureau

PRB continued to provide ongoing oversight of technical assistance activities to AFR/SD and African institutions in reproductive and maternal health. This included participation in the AFR/SD reproductive health and maternal health core groups. PRB’s work under their subcontract was carried out either directly or coordinated by the SARA Reproductive Health Advisor, Ms. Holley Stewart, who has been serving in this capacity since September 2002.

Ms. Stewart, along with Dr. Rhonda Smith of the PRB main office, continued to foster the development, field-testing and enhancement of the REDUCE model of advocating for maternal health, as well as the ALIVE model with respect to newborn health. SARA also continued to leverage non-SARA funds to continue this work under contracts with other donors. The advisors provided technical expertise

as needed, particularly in working with CEFOREP so that it would become a leader in the adaptation of the REDUCE and ALIVE models to various countries.

In November 2003, Ms. Stewart participated in a WAHO strategy workshop for securing RH/FP commodities and reviewing subregional maternal and neonatal health strategy. The meeting took place in Accra, Ghana, and was coordinated by WAHO. It brought together senior- and mid-level health professionals and representatives of non-governmental and international organizations. While there, Ms. Stewart met with technical staff at WAHO, the new AWARE project, and ECOWAS reproductive health managers to strategize and promote a maternal and perinatal health plan for West Africa, including an RH/FP commodities security plan, and also to strengthen links between a regional African institution and partners and to discuss possible work with SARA in maternal health social mobilization and advocacy. Her trip report outlines the outputs of the meeting and recommends some next steps.

In mid-February 2004, Ms. Stewart participated in the Roadmap to Reduce Maternal and Newborn Mortality in Sub-Saharan Africa workshop in Harare, Zimbabwe. While there, Ms. Stewart also attended follow-up meetings. Included were meetings with partners in Harare who attended the workshop to discuss SARA workplan activities with CRHCS and WAHO. She also met with University of Zimbabwe professors and CRHCS to finalize work plan items on repositioning family planning, its overall RH strategy and collaboration with ministries and CAs, and with WAHO's new director of its primary health care and disease control. Finally, Ms. Stewart attended the First Congress on Sexual Health and Rights (SHR) in Africa in Johannesburg, and presented the work that SARA and POLICY have collaborated on regarding the unmet need for family planning in the day and age of HIV/AIDS. While there, she met with colleagues from the Reproductive Health Research Unit of the University of Witwatersrand, and representatives of Abt Associates to discuss RH priorities in the region.

In March 2004, Ms. Stewart travelled to Bamako, Mali, to facilitate the Malian application of the REDUCE/ALIVE models and help CERPOD finalize its work plan for its SO 20 activities. Her trip report describes how the Malian participants developed a strategy for applying the models, and how CERPOD was able to clarify its outputs better under its subcontract for its reproductive health work.

In July 2004, Ms. Stewart participated in the WHO/AFRO Francophone and Anglophone Reproductive Health Managers meetings, a WHO/AFRO meeting on community approaches to maternal and neonatal health, and an additional meeting to prepare for formative analysis on newborn care home practices in Cotonou, Benin, and Johannesburg, South Africa. These fora provided an opportunity to share best practices in RH and define strategies for replication and scaling up of relevant RH best practices. Ms. Stewart also took advantage of this travel to meet with AFRO/DRH, USAID, and AED colleague Dr. Nancy Nachbar, to discuss the newborn care home practices study. They discussed the inclusion of additional maternal aspects and other methodology issues, how the process would take place

Appendix C—Subcontractors' Activities

(both analysis and capacity development), budgets and timing, and how to keep USAID/GH and missions fully involved. Ms. Stewart's trip report details the results of these meetings.

CERPOD

After the major FY 03 reorganization of INSAH, CERPOD's parent organization, which left CERPOD's technical capacity decimated and its managerial/administrative functions were centralized within INSAH itself, it took some time for CERPOD to re-launch activities. By FY 04, however, CERPOD was able to re-group and re-think its subcontract program. As a result, the following accomplishments can be cited:

- ◆ A qualitative and quantitative updating of information in CERPOD's seminal *Youth in Danger* began, with the two consultants involved finishing their reports. The next step involves finalizing the new brochure, which will be published under a new title as a sequel to *Youth in Danger*, and finalizing a dissemination strategy.
- ◆ During the re-organization of INSAH, a sub-regional HIV/AIDS monitoring and evaluation initiative was launched. This is a multi-agency initiative through the Global AIDS Monitoring and Evaluation Support Team (GAMET), involving MEASURE Evaluation, USAID, WHO, UNAIDS, GFATM, World Bank, CDC and others. Situational analyses of West and Central African national HIV/AIDS programs were planned as part of this process. Since CERPOD planned to carry out the same type of situational analysis of NHPs and CBOs in the CILSS countries, it made sense for CERPOD to become part of this initiative with the possibility of playing a greater role beyond the CILSS area. CERPOD's HIV/AIDS advisor was active in this initiative until he left CERPOD early this fiscal year. Since then, the initiative seems to have slowed; while CERPOD has still been able to act as intermediary between the initiative and governments in the region, there has been little recent activity.

By the end of the FY, CERPOD had submitted most of the documentation for a no-cost extension through June 2004 with a revised budget and work plan for completing all subcontract activities.

CRHCS

This subcontract with SARA has yielded numerous outputs. Highlights:

- ◆ CRHCS decided to work initially with Kenya and Malawi to collect up-to-date, country-specific data on the impact of HIV/AIDS on human resources in the health sector. Based on the findings, recommendations to strengthen human resource capacity in these countries will be developed. The experience gained in the initial countries will be replicated in other countries based on availability of resources. An initial workshop was held in Arusha in FY 04 involving three participants from each of the two countries. During the workshop, participants

developed and adapted draft assessment tools for use in the respective countries. Agreement on the detailed methodology, scope and instruments to be used was reached and work plans and budgets for the assessments by the two teams were developed. The survey was conducted, data collected and analyzed, and preliminary reports made available. The team presented the findings at the International Conference of HIV and AIDS in Bangkok in July 2004 and is also in the process of preparing papers for publication.

- ◆ Another activity area of importance was the care and nutrition of people living with HIV/AIDS (PLWHA). During FY 04, CRHCS completed a manual entitled *Providing Nutritional Care and Support for People Living with HIV/AIDS – Guidelines for Policy Makers and Programme Managers in the African Region*. CRHCS disseminated copies of the manual to all ECSA member states. The guidelines were disseminated during the Food Fortification workshop held in Lusaka, Zambia, in March 2004. All these countries, plus Ghana and The Gambia, are using the manual as a reference to update their own national guidelines for nutritional care and support for PLWHA.
- ◆ Another key activity under this subcontract is a guide for improving health policy development and monitoring. The guide will be used as resource for policy monitoring training of policy analysts/advocates in six selected countries. During FY 04, the printed policy guide was distributed as a resource material for the regional advocacy training meeting held in the Seychelles in 2003. Copies of the guide were also distributed at the 2003 consultative meeting on the Development of Adolescent Health and Development Policies organized by WHO/AFRO and CRHCS. Finally, it was disseminated at the most recent annual meeting of the member country directors general of public health ministries in July 2004.

Further dissemination of materials and publications is expected in the last year of this subcontract, which is also slated for extension until June 30, 2005.

NAP+

The subcontract implemented in FY 03 was the final several months of the 2003 calendar year subcontract. Again, NAP+ put emphasis on operational costs but did add some publications of note. Key deliverables this year were an updated directory of national networks of PLWHAs in Africa, guidelines on behavior change communication for stigma reduction, a plan for a GIPA training program, a resource mobilization tool and a resource mobilization training manual. As FY 04 ended, NAP+ submitted a proposal for a final subcontract that will end in June 2005.

Appendix D

CTO Letter Tracking List

CTO Letter Tracking List

- 100. Ellen Piwoz to provide TA on HIV & infant feeding, Zimbabwe and SA
Completed
- 101. Preaward financial review of CERPOD
Completed
- 102. Renuka Bery to bring a Dissemination and Advocacy perspective to social mobilization meeting, AFRO/EPI Polio Eradication Unit
Completed
- 103. Ellen Piwoz to participate in REDSO/PHN and the Regional Centre for Quality of Health Care Conference
Completed
- 104. Steven Kinoti to provide TA to the CRHCS DJCC, Arusha, Tanzania
Completed
- 105. Yolande Miller-Grandvaux to present papers at CIES conference in San Antonio, TX
Completed
- 106. Yolande Miller-Grandvaux to assist USAID/Mali in reviewing its education agenda and study the community school models
Completed
- 107. Suzanne Prysor-Jones to participate in nutrition and community IMCI planning and updating other SO 7, 8 and 9 activities in West Africa
Completed
- 108. Steve Kinoti to attend consultation on HSR priorities on HIV/AIDS, Pretoria, June 19-23
Completed
- 109. Suzanne Prysor-Jones to participate in IAWG on household and community approaches to IMCI
Completed
- 109a. Onanga Bongwele to Durban IAWG on community IMCI
Cancelled
- 110. Renuka Bery to provide dissemination TA to RCQHC
Completed

Appendix D—CTO Letter Tracking List

- 111. Yolande Miller-Grandvaux to support USAID/Mali and assess ERNWACA's regional program & the NGO role in education
Completed
- 111a. Yolande Miller-Grandvaux to provide TA to USAID/Benin and Ethiopia conference on NGOs and basic education
Completed
- 112. Ellen Piwoz to provide TA on MTCT/infant feeding issues
Completed
- 112a. Ellen Piwoz to provide TA on MTCT/infant feeding issues: follow-up Geneva meeting
Completed
- 113. Yolande Miller-Grandvaux to coordinate with IDRC in Ottawa
Completed
- 114. Youssef Tawfik to be SARA participant in WHO meeting on Inter-Country Orientation on Family and Community IMCI, Uganda
Completed
- 115. Suzanne Prysor-Jones to attend WHO/AFRO advisory group consultation on IMCI, 11/28-30/00, Harare, Zimbabwe
Completed
- 116. Suzanne Prysor-Jones to Harare for IMCI meeting, January 22-26, 2001
Completed
- 117. Caroline Blair to attend Intl. Technical Consultation of Midwifery Leaders
Completed
- 118. Participation of nutrition staff in major international meetings during FY 01
Completed
- 119. Suzanne Prysor-Jones and Duale Sambe to provide TA to WAHO, and Suzanne to Dakar
Completed
- 120. Stephen Kinoti's participation in REDSO partners' meeting
Completed
- 121. Yolande Miller-Grandvaux and Joe Coblentz travel to ERNWACA interviews and CERPOD
Completed

Appendix D—CTO Letter Tracking List

- 122. Youssef Tawfik to IMCI collaboration and strategy reviews, April 23 - May 4, 2001
Completed
- 123. Caroline Blair participation in PAC steering committee, Dakar, May 2001
Cancelled
- 124. Stephen Kinoti's travel, identifying & responding to impacts of HIV/AIDS on HR in health sector
Completed
- 125. Caroline Blair to do work planning with CRHCS, women's media network, REDUCE in Mozambique
Completed
- 126. Yolande Miller-Grandvaux to assist in development of new education program for USAID/Mali
Completed
- 127. Sambe Duale to Bamako and Abidjan for malaria and MTCT meetings
Completed
- 128. Youssef Tawfik participation in USAID-UNICEF review of IMCI programs
Completed
- 129. Renuka Bery to facilitate dissemination and repackaging workshop and electronic marketing
Completed
- 130. TB travel by Sambe Duale, September 18-27, 2001
Trip cancelled (security)
- 131. IMCI travel by Suzanne Prysor-Jones, September - October 2001
Trip cancelled (security)
- 132. Presentation and TA by Dorcas Lwanga at a workshop on developing nutrition guidelines for PLWHA, Uganda, November 12-16, 2001
Completed
- 133. Sambe Duale travel to ICASA meeting in Burkina Faso, December 10-16, 2001 to coordinate a roundtable discussion on the contribution of regional networks in the fight against HIV/AIDS in Africa
Completed

Appendix D—CTO Letter Tracking List

- 134. Stephen Kinoti to provide TA to CRHCS, NAP+, and REDSO in HIV/AIDS prevention, care, and support, Kenya, January 2002
Completed
- 135. Youssef Tawfik to provide TA for the development of a national IMCI strategy in Uganda
Completed
- 136. Dissemination of issues paper on health sector human resource crisis in Africa
Completed
- 137. Ellen Piwoz participation in Barcelona AIDS meeting, July 2002
Completed
- 137a. Additional participation of Stephen Kinoti and Michael Angaga in Barcelona AIDS meeting, July 2002
Completed
- 137b. Additional participation of Jose Molina in Barcelona AIDS meeting, July 2002
Completed
- 138. Presentation of papers at CIES conference in Orlando, FL by Yolande Miller-Grandvaux and Brehima Tounkara, March 2002
Completed
- 139. SARA TA at ERNWACA strategic session, Dakar, February 2002
Completed
- 140. Development and testing of REDUCE tool for Africa through follow-up in Mozambique
Cancelled
- 141. SARA TA to CRHCS Family and Reproductive Health Steering Committee meeting, Mozambique, March 2002
Completed
- 142. Suzanne Prysor-Jones participation in Global Consultation on Child Health conference in Stockholm, March 2002 (fully funded by WHO)
Completed

Appendix D—CTO Letter Tracking List

- 143. Suzanne Prysor-Jones facilitation of BASICS/WARO and CORE workshop on community IMCI, Senegal, March 31-April 13, 2002
Completed
- 144. SARA staff meetings with SARA Partners and participation in USAID/ REDSO Partners Meeting, Nairobi, Kenya and Arusha, Tanzania, April 20-May 3, 2002
Completed
- 145. SARA TA to University of Western Cape for MOH study on the impact of the PMTCT program on infant feeding in South Africa
Combined with other travel
- 146. Youssef Tawfik travel to Uganda and Zimbabwe to assist in further developing the national strategy for involving private practitioners in child survival programs, April 24-May 9, 2002
Completed
- 147. Sambe Duale to provide TA for the evaluation of the Family Health and AIDS in West and Central Africa Project, Côte d'Ivoire and Burkina Faso, April 2002
Completed
- 148. SARA staff meetings with SARA Partners and participation in USAID/ REDSO Partners Meeting, Nairobi, Kenya and Arusha, Tanzania, April 20-May 3, 2002
Completed
- 149. Yolande Miller-Grandvaux travel to assess education sector strategies, Democratic Republic of the Congo, May 27-June 6, 2002
Completed
- 150. Sambe Duale travel to Burkina Faso to provide TA at WAHO strategic planning meeting and IDSR review, May 2002
Completed
- 151. Oscar Picazo support to CESAG and National Health Accounts, Senegal and Kenya, May 28-June 12, 2002
Completed
- 152. Stephen Kinoti attendance and Facilitation at the HIV/AIDS Policy Advisory Committee (HAPAC), Arusha, Tanzania, July 2002
Completed

Appendix D—CTO Letter Tracking List

- 153. Yolande Miller-Grandvaux to provide TA to USAID/Mali education program, July 24-August 1, 2002
Completed
- 154. Dorcas Lwanga to provide TA and give a presentation at ECSA nutrition focal points meeting, Dar es Salaam, Tanzania, July 2002
Completed
- 155. Kinday Ndure technical consultations with BASICS II WARO nutrition team
Completed
- 156. Kinday Ndure to provide TA to WAHO on TOT for nutrition advocacy
Completed
- 157. Youssef Tawfik to provide TA to workshop on quality assurance in Uganda and NGOs in IMCI in Zambia, August 2002
Completed
- 158. Suzanne Prysor-Jones to provide TA to IAWG meeting on IMCI and to WHO on IMCI/maternal health issues, Geneva, September 2002
Completed
- 159. Dorcas Lwanga to provide TA to regional meetings on nutrition care and support to PLWHA, Mobassa, Kenya, August 2002
Completed
- 160. SARA technical presentation and participation at WABA Forum, Arusha, Tanzania, September 2002
Completed
- 161. Yolande Miller-Grandvaux facilitation and participation at Basic Education Exchange in Ethiopia, September 26-October 6, 2002
Completed
- 162. Sambe Duale participation in the 3rd MIM Pan-African Malaria Conference and other Health Meetings in Arusha, Tanzania, November 11-22, 2002
Completed
- 163. Oscar Picazo participation in Consultative Meeting on Human Capacity Development and HIV/AIDS in London, October 2002
Completed

- 164. Ellen Piwoz WHO-funded travel to Geneva, Switzerland and Harare, Zimbabwe to provide technical support to WHO activities related to HIV/AIDS prevention, care, and support, November 2002
Completed
- 165. Suzanne Prysor-Jones regional reproductive health activities in ECSA, September 2002
Completed
- 166. Stephen Kinoti joint planning of collaborative activities with REDSO/ESA and CRHCS, October 2002
Completed
- 167. Antonia Wolff TA to polio and other EDSR meetings in Harare, November 4-8, 2002
Completed
- 168. Ellen Piwoz to facilitate WHO regional workshop on operations research on HIV and infant feeding, October 2002
Completed
- 169. Stephen Kinoti participation in/facilitation of MOH, AIDS Councils, AIDS Program Managers Meetings in Kampala, October 2002
Completed
- 170. Ellen Piwoz to technical consultations with WHO/AFRO to develop nutrition strategy in PLWHA programs, October 2002
Completed
- 171. Youssef Tawfik private practitioners in child survival programs (IMCI, RBM) in collaboration with WHO/AFRO December 2002
Completed
- 172. Holley Stewart TA to SAGO Conference in Bamako, Mali, December 2002
Completed
- 173. Oscar Picazo TA to global IMCI analytic review, January 2003
Completed
- 174. Stephen Kinoti TA to ECSA Health Community in specific events and programs follow-up, February 2003
Completed

Appendix D—CTO Letter Tracking List

- 175. Youssef Tawfik including private practitioners in child survival programs in collaboration with WHO
Funded from other sources
- 176. Holley Stewart TA to WAHO, CEFOPREP, CERPOD, CAREF and ECSA Health Community on FP/RH
Trip cancelled (security)
- 177. Antonia Wolff to facilitate IDSR workshop, WHO/HQ, Geneva
Trip cancelled (security)
- 177a. Sambe Duale TA to IDSR workshop
See 177
- 178. Oscar Picazo TA to human resource development working groups and global IMCI analytical review, March 2003
Trip cancelled (security)
- 179. Kinday Samba Ndure TA to Essential Nutrition Actions (ENA) workshop in Madagascar, April 2003
Completed
- 180. Kinday Samba Ndure to orientation workshops for interaction of nutrition approaches & tools into training curricula
Completed
- 181. Ellen Piwoz TA to WHO advisory group on nutritional requirements of PLHA, May 2003
Completed
- 182. Stephen Kinoti TA to various ECSA initiatives, June 2003
Completed
- 182a. Stephen Kinoti addition of Geneva to ECSA initiatives travel, June 2003
Completed
- 182b. Stephen Kinoti addition of Nairobi to ECSA travel, June 2003
Trip cancelled (security)
- 183. Youssef Tawfik strengthening link between IMCI and RBM
Trip cancelled
- 184. Oscar Picazo TA to World Bank Flagship Course on sustainable financing of health systems & similar issues, May 2003
Completed

- 185. Suzanne Prysor-Jones TA to Inter-Country Meeting for IMCI Focal Persons, Francophone countries, May 2003
Completed
- 186. Stephen Kinoti TA to ICASA conference, September 2003
Completed
- 186a. Stephen Kinoti Post-ICASA travel - addressing needs, gaps of African public health schools
Completed
- 187. Sambe Duale TA to SANRU Conference, Kinshasa, DRC, August 2003
Completed
- 188. Suzanne Prysor-Jones TA to Fourth Joint Task Forces meeting of Malaria Control/IMCI Prysor-Jones, September 2003
Completed
- 189. Suzanne Prysor-Jones support to reproductive health in Sub-Saharan Africa, October 2003
Completed
- 190. Ellen Piwoz TA to two WHO meetings on HIV & infant feeding/nutrition & HIV Piwoz, November 2003
Completed
- 191. Stephen Kinoti TA to CRHCS regional conferences in November 2003
Completed
- 192. Holley Stewart TA to WAHO strategy workshop on RH/FP, November 2003
Completed
- 193. Kinday Samba Ndure for Dissemination & Introduction of Nutrition Approaches, Tools to NGOs in West Africa
Completed
- 194. Sambe Duale TA to ECOWAS HIV/AIDS in military meeting with WAHO
Completed
- 195. Holley Stewart TA to workshop on road map to reduce maternal/newborn mortality, February 2004
Completed

Appendix D—CTO Letter Tracking List

- 196. Suzanne Prysor-Jones TA to health newborn partnership meeting, February 2004
Completed
- 197. Ellen Piwoz to feeding of the Non-Breastfed Infant 6-24 months in developing countries, March 2004
Completed
- 198. Sambe Duale to joint review of AFRO grant, March 2004
Completed
- 198a. Sambe Duale travel for second week to joint review of AFRO grant
Completed
- 199. SARA presentation on ZVITAMBO study findings at International AIDS Conference, July 2004
Completed
- 1001. Holley Stewart to work planning with CERPOD on adolescent health & safe motherhood model in West Africa, March - April 2004
Completed
- 1002. SARA support to WAHO Annual West Africa Nutrition Forum, Cotonou
Planning meeting attended
- 1002a. Resource people for support to WAHO Annual West Africa Nutrition Forum, Cotonou
Completed
- 1003. Suzanne Prysor-Jones to Healthy Newborn Partnership advocacy follow-up meeting, May 2004
Completed
- 1004. Kinday Samba to technical consultations on infant & small child feeding in West Africa
Completed
- 1005. Agnieszka Sykes technical assistance to various East & Southern SO 21 initiatives
Completed
- 1006. Sambe Duale Technical assistance to 5th IDSR task force meeting, June 2004
Completed

Appendix D—CTO Letter Tracking List

- 1007. Sambe Duale technical assistance to WHO technical review meeting of draft surveillance system protocol
Completed
- 1008. Holley Stewart technical assistance to WHO/AFRO RH managers meetings & meeting on MNH, July 2004
Completed
- 1009. Martita Marx technical assistance to IMCI focal persons meeting in Francophone Africa, July 2004
Completed
- 1010. Ellen Piwoz technical assistance to USAID/Mozambique on food/nutrition in HIV/AIDS programming, August 2004
Completed
- 1011. Suzanne Prysor-Jones technical assistance to 5th JTF meeting, Malaria Control / IMCI, Maputo
Trip cancelled (staff illness)
- 1012. Renuka Bery technical assistance to CRHCS' info communication coordinator, September 2004
Completed
- 1013. Agnieszka Sykes for familiarization with West Africa Regional HIV/AIDS activities, September 2004
completed
- 1014. Holley Stewart participation in WHO/AFRO Regional RH Task Force Meeting, October 2004
Trip scheduled for October 2004
- 200. Hiring Dr. Bill Rau as a SARA project evaluation & HIV/AIDS policy advisor
Completed
- 200a. Bill Rau, 10 more days
Completed
- 200b. Bill Rau, 10 more days
Completed
- 200c. Continuation of Bill Rau through January-April 2000, 35 more days
Completed

Appendix D—CTO Letter Tracking List

- 200d. Development of impact review paper on SO 20 male involvement activities in RH (Bill Rau)
Completed
- 201. Hiring Dr. Stephen Kinoti as SARA consultant
Completed
- 201a. Familiarization trip for Dr. Steve Kinoti to SA
See 104 above
- 202. Roger Gosselin facilitation of SATI workshop
Completed
- 203. Beth Preble to complete paper on HIV and nutrition
Completed
- 203a. HIV/AIDS and nutrition paper, Beth Preble, 5 more days
Completed
- 204. Transitioning Dissemination Center activity to a regional institution (Lawrence Gikaru)
Completed
- 205. Field testing of REDUCE model, Uganda
Completed
- 205a. Steve Kinoti involvement in REDUCE model, Uganda
Completed
- 205b. Expansion of REDUCE model (Burkhalter, Sommerfelt)
Sommerfelt ongoing
- 205c. Safe Motherhood/EOC REDUCE model; cost/benefit analysis
Completed
- 205d. REDUCE Senegal field application
Completed
- 205e. Extension of Elisabeth Sommerfelt for REDUCE expansion (see 205b also)
Ongoing
- 205f. Thidiane Ndoye facilitation of REDUCE model in Nigeria
Cancelled
- 205g. CEFOREP TA to Mauritania REDUCE application
Completed

- 205h Additional costs for Mauritania REDUCE application
Completed
- 206. Linda Kean for finalization of Nutrition Briefs
Completed
- 207. Design for Qualitative Manual (Paula Whitacre)
Completed
- 208. Documentation of results of EPR teams within AFRO West & Great Lakes epidemic blocks
Completed
- 209. Updating country program briefs for AFR/SD/HRD
Completed
- 210. Issues paper on early and abrupt weaning for HIV+ mothers (Ellen Piwoz)
Completed
- 210a. Issues paper on early and abrupt weaning for HIV+ mothers: finalization and repackaging
Completed
- 210b. Issues paper on early and abrupt weaning for HIV+ mothers: printing and dissemination
Completed
- 210c. Issues paper on early and abrupt weaning for HIV+ mothers: reprinting and dissemination
Dissemination ongoing
- 211. Strategy paper on reducing MTCT in Africa (Beth Preble)
Completed
- 211a. MTCT strategy paper: 15 more days for consultant
Completed
- 211b. Strategy paper on reducing MTCT: translation, printing and dissemination
Completed
- 211c. Beth Preble to finalize strategy paper on reducing MTCT
Completed
- 211d. Reprinting and dissemination of PMTCT guide in English
Dissemination ongoing

Appendix D—CTO Letter Tracking List

- 212. Discussion paper: USAID budget, staffing, prog. decisions, priority health activities in transition countries, Africa
Activity postponed indefinitely
- 213. Suzanne Prysor-Jones to provide support to inter-country orientation meeting on family/community IMCI
Completed
- 214. Suzanne Prysor-Jones to provide TA to AVSC in costing out COPE introduction & scaling up
Partner cancelled activity
- 215. Discussion paper on HIV/AIDS prevention, care, support in WCA
Completed
- 215a. Sambe Duale and Dounia to WCA PHN strategy meeting for HIV/AIDS, 11/6-8/00
Completed
- 216. Finalization of Manual on Policy Development, Implementation and Monitoring (Millie Morton)
Completed
- 217. Review of HIV/AIDS impact on health systems (Linda Tawfik)
Completed
- 217a. Review of impact of HIV/AIDS on health systems: extension of Linda Tawfik
Completed
- 218. Report to Congress on MTCT (Preble)
Completed
- 219. Changing role of NGOs in basic education in Africa
Completed
- 219a. NGOs in basic education: ERNWACA part
Completed
- 219b. NGOs in basic education: modified RTI budget
Completed
- 219c. Guinea consultant for RTI subcontract: NGOs in education
Completed

Appendix D—CTO Letter Tracking List

- 220. Finalization of malaria document (Carol Baume)
Completed
- 221. Paper on Strategies to Accelerate Expansion of IMCI - Country Examples (Ken Heise)
Completed
- 222. Documentation of results and lessons learned on a few critical components of USAID/OIRH-PASA
Completed
- 223. Private sector and child health care - Introduction
Completed
- 224. Moving forward with an advocacy strategy
Completed
- 225. Development of national strategy in Uganda for private sector working in national child survival program
Completed under CRHCS subcontract
- 226. Consultant for USAID-UNICEF review of IMCI programs (Clara Olaya)
Completed
- 226a. Additional two days for Dr. Olaya
Completed
- 227. Editing and translation of RESAR studies on Male Involvement in RH
Completed
- 227a. Editing and translation of RESAR studies – 10 more days for Semra Asefa
Completed
- 227b. Editing and translation of RESAR studies - 20 more days for Semra Asefa
Completed
- 228. WHO/AFRO Newborn Assessment - Phase I
Completed
- 229. Promoting private and public sector collaboration in HIV/AIDS in Africa
Completed
- 229a/b. Promoting private and public sector collaboration in HIV/AIDS in Africa - FY 03
Completed

Appendix D—CTO Letter Tracking List

- 229c. Promoting private and public sector collaboration in HIV/AIDS in Africa -
FY 03 additional days
Completed
230. Data quality assessment of AFR/SD/HRD's PHN and Education
indicators
Completed
231. Completion of REDUCE/ALIVE facilitator/organizer manual
Completed
232. TA to field test and revise tools for counseling HIV+ women about infant
feeding
Completed
233. TA to development of c-IMCI Briefing Package by WHO/AFRO
Completed
234. SARA self-assessment
Completed
235. Summary of PROFILES evaluation findings for policy advocacy &
dissemination
Completed
236. CERPOD evaluation
Completed
237. Development of package of tools to include formal/informal private
practitioners in child survival programs
Postponed indefinitely
238. Review of adolescent RH health programs in the CILSS region in
collaboration with CERPOD
Completed
239. TA to SARA on Child Survival stocktaking
Completed
- 239a. TA to SARA on Child Survival stocktaking - additional AED consultant
time
Completed
- 239b. TA to SARA on various child survival initiatives: Coles, Barat time
Ongoing

Appendix D—CTO Letter Tracking List

- 240. Monitoring & evaluation consultant for AFRO grant review team
Policy Project hired consultant
- 241. Partnership support for USAID/CDC Rwanda PEPFAR Program
Completed
- 242. Completion of final Kenya, Malawi reports on impact of HIV/AIDS on health work force
Completed
- 243. Financial analysis of information gathered for child survival stocktaking
Completed
- 244. Support to CRHCS in recruiting Information & Communications Coordinator
Completed
- 245. Document assessments & re-dissemination strategies
Ongoing
- 246. Assessing Role of Indigenous Knowledge Practices & Institutions in Successful Community-based OVC Support Activities: Emerging Lessons from Literature and Experience in Africa
Cancelled by client with agreement of AFR/SD
- 247. Guidance document on Basic Care Package for Children living with HIV/AIDS
Ongoing
- 300. Tulane University activities under subcontract FY 00
Completed
- 301. Sambe Duale at Global Meeting on M&E of HIV Prevention, etc. in Berlin, April 12-24, 2000
Completed
- 350. Morehouse University School of Medicine activities under SARA II, October-November 1999
Completed
- 351. Morehouse - Extension of Lalla Toure through January 31, 2000
Completed
- 352. Institutional strengthening of SAGO
Completed

Appendix D—CTO Letter Tracking List

- 352a. Same as 352. Adds Betty Willingham
USAID did not approve. Cancelled.
- 400. Follow-up activities to West Africa EOC Conference of December 1998
(JHPIEGO)
Completed
- 401. Francophone MAQ bulletin
Completed
- 402. Printing and dissemination of French language PAC brochure
Completed
- 403. JHPIEGO subcontract
Completed
- 450. Population Reference Bureau (PRB) activities under SARA II, October
1999 through January 2000
Completed
- 451. Rhonda Smith for PRB for FY 01
Completed
- 452. Rhonda Smith for PRB for FY 02 plus annotated bibliography
Completed
- 453. Rhonda Smith for PRB for FY 03
Completed
- 500. Training for CERPOD in ISSA software (Victor Canales)
Completed
- 501. Follow-up activities to West Africa EOC Conference of December 1998
(CEFOREP)
Completed
- 501a. Follow-up to EOC conference: 30 more days for consultant
Completed
- 502. CESAG-University of Montreal partnership in health research program
Activity cancelled before submission
- 503. Training of CESAG staff in OR methodology
Completed

- 504. Development of key tools and activities (CERPOD consultants)
Completed
- 505. Reintegration of IDC in East & Southern Africa into CRHCS information dissemination program
Completed
- 506. TA to SAGO to become more policy/action-oriented
Completed
- 507. ACI TA to CERPOD on training in qualitative analysis techniques for Francophone Africa
Completed
- 508. Improving RH in the Sahel (CERPOD subcontract)
Subcontract revised/rebudgeted
- 509. CRHCS subcontract
Subcontract underway
- 510. Preaward institutional survey of ERNWACA
Completed
- 511. Institutional strengthening of ERNWACA
Completed
- 511a. Budget adjustment for 511
Completed
- 512. Strengthening NAP+ operations, etc.
Completed
- 512a. Strengthening NAP+ operations, etc. - CY 03
Completed
- 512b. Strengthening NAP+ operations, etc. - CY 04
Negotiations for subcontract
- 513. Study on role of NGOs in basic education in South Africa
Completed
- 514. SWAA subcontract
Completed

Appendix D—CTO Letter Tracking List

- 600. Sponsorship of RESAR country researchers and SARA staff to annual RESAR meeting
Completed
- 601. Making presentation to CRHCS on electronic communication
Completed
- 602. PROFILES training & follow-up in East and Southern Africa in collaboration with CRHCS
Funded from other sources
- 603. RESAR participation in Post-Cairo Assessment of RH Policies & programs in W. Africa
Completed
- 604. SAGO biennial conference, CEFORP EOC follow-up, and CERPOD communication activities
Completed
- 604a. Support to planning of SAGO biennial conference, etc., per CTO letter 604
Completed
- 605. Post-CIES study tour for 3 African Network representatives
Completed
- 606. Advocacy training workshop for Anglophone chapters of ERNWACA
Completed
- 607. SARA support to CRHCS DJCC meeting
Completed
- 607a. SARA support to CRHCS DJCC meeting - additional costs
Completed
- 608. Panel presentation at the National Summit for Africa
Completed
- 609. Support to 13th Conference of IUATLD Africa Region, Conakry, Guinea
Completed
- 610. Support presenters and dissemination of materials at Ghana Health Foundation conference
Completed

- 611. Durban International AIDS meeting and pre-conference satellite meeting on HIV & breastfeeding
Completed
- 612. African participants to workshop on planning for HIV/AIDS in Education, Durban, South Africa
Completed
- 613. Support to preparation and facilitation of nutrition focal points meetings
Completed
- 614. Consultative meeting on ensuring appropriate use of essential supplies for child health
Completed
- 615. Phil Musgrove presentation at USAID PHN SOTA course, June 5-9
Completed
- 617. Assessment of implementation of COPE initiative in Guinea
Completed
- 618. Specialized TA to USAID staff in Durban
Completed
- 619. Review of contribution of social science to malaria control
Completed
- 620. Expert working group meeting for TB prevention & control among African women
Completed
- 620a. TB and Women expert working group meeting: adds Quaye and Hudelson
Completed
- 620b. Nguma and Wanwalo to second research WS on gender and TB in Sweden
Completed
- 620c. Pilot study in Tanzania on TB and gender
Completed
- 620d. Silvia Holschneider to support pilot study of 620c
Completed
- 621. SARA staff & African expert participation in HIV infection & AIDS course
Completed

Appendix D—CTO Letter Tracking List

- 622. Support to nutrition focal points annual meeting, Bamako, September 25-29, 2000
Completed
- 623. Regional HIV/AIDS policy analysis & monitoring workshop
Completed
- 624. Support to Steven Shongwe, CRHCS, to attend international conference on quality of care
Completed
- 625. African participation in AHILA Conference and Stephen Kinoti travel to Nairobi and Arusha
Completed
- 626. Support for 8th international SWAA conference
Completed
- 627. SAGO Congress 2000 and Presentation of REDUCE model, December 4-8, 2000
Completed
- 628. Consultative meeting on advocacy
Completed
- 629. USAID PHN meeting, Bamako (ACI facilitation)
Completed
- 630. World AIDS Day faith leaders summit follow-on conference, December 1-5, 2000
Completed
- 631. HIV/AIDS DG Toolkit Workshop Participant Travel
Completed
- 632. NAP+ Strategic Planning Meeting, February 5-8, 2001
Completed
- 633. Intl. Confed. of Midwives Workshop, Harare, March 19-21, 2001
Completed
- 633a. Reprinting of malaria & pregnancy press kits
Completed

634. Working group meeting to develop framework and plan conference, ECOWAS armed forces
Completed
635. Presentation of findings on HIV/AIDS in education systems at ECOWAS HIV in education conference
Completed
636. Support to African participants in RBM4 meeting, April 18-20, 2001
Completed
637. Vision 2010: First Ladies Advocacy Meeting, Bamako, May 7-10, 2001
Completed
638. Consultations on Youth Livelihood Initiatives with Jamie Schuur
Completed
639. MTCT CA meeting, June 11, 2001
Completed
640. Private sector role in HIV/AIDS programs
Completed
- 640a. Private sector meeting on HIV/AIDS programs
Completed
- 640b. Private sector role in HIV/AIDS programs: second meeting, October 2001
Meeting cancelled
- 640c. Private sector role in HIV/AIDS programs: AGOA meeting in Mauritius
Completed
- 640d. Private sector role in HIV/AIDS programs: Nigeria private sector official to 2003 AGOA meeting
Cancelled - official unavailable
- 640e. Private sector role in HIV/AIDS programs: AGOA meeting brochures
Brochures produced/delivered
641. SARA support for a planning meeting for the development of a WAHO strategic plan
Completed
642. ACI HIV and Development workshop with SFPS
Completed

Appendix D—CTO Letter Tracking List

- 643. TA to CERPOD in work plan
Activity suspended for the moment
- 644. Exchange travel study tour: Senegal-Zambia
Completed
- 645. Capacity building for RCQHC
Completed
- 646. Support for CORE-sponsored regional NGO/PVO workshop on malaria prevention
Completed
- 647. Support for Regional NGO/PVO workshop on community IMCI
Completed
- 647a. Adds Blondine Codjia, Benin NGO representative to NGO IMCI workshop
Completed
- 648. Meeting of IMCI IAWG, Washington, DC, November 2001
Completed
- 649. Regional West Africa PAC meeting and related travel in West Africa by Caroline Blair
Completed
- 650. Regional model for website competition: Namibia test
Completed
- 651. Collaborative workshop on TB and HIV/AIDS
Completed
- 652. RATN experts meeting to develop strategies for strengthening HIV/AIDS program management in ECSA
Completed
- 653. Consultative meeting on rethinking HIV/AIDS and development
Completed
- 654. Support to ECSACON scientific meeting, malaria and pregnancy session
Completed
- 655. Support to dissemination of RESAR studies on male involvement
Completed

- 656. Stakeholder planning meeting for Empowering Africa's Young People Initiative
Completed
- 657. Support to dual protection meeting
Completed
- 658. WAHO nutrition focal points meeting
Completed
- 659. Ibrahima Bob participation in AHILA Conference
Completed
- 660. MIM review panel African participants in Washington, DC
Completed
- 661. Sambe Duale travel to MIM Pan-African Malaria Conference
Completed
- 662. Strengthening leadership of PLWHA associations
Completed
- 663. WAHO senior staff study tour of CRHCS
Cancelled
- 664. REDUCE/Nigeria presentation in The Gambia
Completed
- 665. CEFOREP participation in the SAGO Biennial Conference
Completed
- 665a. CEFOREP participation in the SAGO Biennial Conference—additional costs
Completed
- 666. Support to WAHO, CEFOREP in organizing MNH workshop, March 2003
Completed
- 667. CORE regional workshop for NGOs/PVOs on malaria prevention and control in Francophone countries
Completed
- 668. Sullivan Summit, Abuja, Nigeria, July 2003
Completed

Appendix D—CTO Letter Tracking List

- 669. Technical assistance to WAHO subregional strategy for reducing maternal and perinatal mortality, CEFOREP planning
Completed
- 670. OVC conference, September 2003
Completed
- 670a. OVC conference, September 2003, background paper consultant (Isolde Birdthistle)
Completed
- 670b. OVC Conference, September 2003 - revised budge
Completed
- 671. Support for review, dissemination of TB and gender study findings
Completed
- 672. Support to annual West Africa Nutrition Focal Points Meeting, September 2003
Completed
- 673. TA & presentation at UNICEF regional technical meeting: Vision 2010 follow-up
Completed
- 674. Mwangaza Action participation in White Ribbon Alliance workshop in Zambia
Individual unable to attend event
- 675. Support for 2nd partnership for IVM meeting, Dakar, February 2004
Completed
- 676. Forum on involving the private sector for health outcomes: steering committee/Africa Forum
Steering Committee Meeting held
- 676a. Forum on involving the private sector for health outcomes: steering committee/Africa Forum
Steering Committee Meeting held
- 677. Consultative meeting on Strengthening Public Health Training Capacity, March 2004
Completed

- 678. Rapporteur travel to SOTA meeting, June 2004
Completed
- 678a. Ellen Piwoz travel to SOTA meeting, June 2004
Completed
- 678b. Facilitator travel to SOTA meeting, June 2004
Completed
- 678c. Paper on short-term measures for HIV-related staffing shortages in
PEPFAR countries
Completed
- 679. RBM consultative meeting on role of informal providers in management of
malaria, May 2004
Completed
- 680. Regional economic & livelihoods strengthening for OVC consultative
meeting, June 2004
Completed
- 700. Publication of a supplement to the Annals of Tropical Medicine and
Parasitology on malaria and pregnancy
Completed
- 701. SD HIV/AIDS Briefing Materials folders
Completed
- 702. Printing of Nutrition Briefs
Completed
- 703. Printing of four program profiles for CRHCS Jubilee conference
Completed
- 704. Translation, printing & mailing of 3 malaria publications
Completed
- 705. Editorial assistance for SARA publications
Ongoing
- 706. Printing of French version of facilitation manual for Making a Difference to
Policies and Programs
Completed

Appendix D—CTO Letter Tracking List

- 707. Helping local health workers better analyze, use their data to improve services
Completed
- 708. Production of an IMCI policy brochure
Completed
- 708a. Reprinting of IMCI policy brochure, English & French
Dissemination ongoing
- 709. Printing of Qualitative Research for Improved Health Programs
Completed
- 709a. Reprinting of qualitative research manual
Dissemination ongoing
- 710. Printing of HIV/AIDS Briefing Packets
Completed
- 711. Development & dissemination of user-friendly brochure on best practices in EOC in West Africa
Completed
- 711a. EOC brochure: second phase with ACI, Sic Some
Completed
- 712. Translation & printing of infectious diseases laboratory manual
Completed
- 712a. ID lab manual: color proofing and final printing costs
Completed
- 713. Printing of education assessments
Completed
- 714. Production of AIDS Toolkits
Activity postponed indefinitely
- 715. Publication of ERNWACA's transnational education studies
Completed
- 715a. Publication of ERNWACA's transnational education studies - English
Completed

- 715b. Publication of ERNWACA's transnational education studies - French
Completed
- 716. Reprinting of Introduction to Advocacy
Dissemination ongoing
- 716a. Reprinting of Introduction to Advocacy
Dissemination ongoing
- 717. Disseminating empowering community documents to IMCI participants in South Africa
Completed
- 718. Translation of REDUCE script and presentation into French
Completed
- 719. Translation & printing of malaria and pregnancy advocacy brochure
Completed
- 719a. Reprint of malaria and pregnancy brochures, English
Completed
- 719b. Reprint of Malaria and Pregnancy brochures (revised version)
Dissemination ongoing
- 720. Production of manual on policy development, implementation, and monitoring
Dissemination ongoing
- 721. Production of HIV and nutrition paper
Completed
- 721a. HIV and Nutrition Paper: French
Dissemination ongoing
- 721b. Reprint of HIV and nutrition paper, English
Dissemination ongoing
- 722. Production of color slides of REDUCE presentation
Completed
- 723. Dissemination of Partnerships for Communication & Change
Dissemination ongoing

Appendix D—CTO Letter Tracking List

- 724. Printing of French version of Empowering Communities (w/ PCS)
Completed
- 725. AJTMH publication purchase and dissemination
Completed
- 726. Reprinting of Boly Guide
Completed
- 727. Editorial Supplement in Africa Health Journal on HIV/Nutrition
Completed
- 728. Printing and dissemination of RH Briefing Packet
Completed
- 728a. Printing and dissemination of RH Briefing Packet – French
Dissemination ongoing
- 728b. Reprinting and dissemination of English RH Briefing Packets
Dissemination ongoing
- 729. Translation of REDUCE assumptions paper and selected spreadsheets
Completed
- 730. Developing various OVC products
Completed
- 730a. Finalization of OVC products
Completed
- 731. Reprint of Making a Difference to Policies and Programs
Dissemination ongoing
- 732. SARA support to SFPS materials for reproductive health
Underway
- 733. Production and dissemination of NGO study and repackaging information into user-friendly format
Dissemination ongoing
- 734. Printing and dissemination of private sector paper
Dissemination ongoing
- 735. Reprinting of Indicators Guide, Volume II
Dissemination ongoing

- 736. Publication and dissemination of Guide to Research on Care-Seeking for Childhood Malaria
Dissemination ongoing
- 737. Printing of AIDS toolkits on CD-ROMs
Completed
- 738. HIV/AIDS PVO Consultative Meeting, October 2002
Completed
- 738a. Printing and dissemination of HIV/AIDS PVO Consultative Meeting report
Dissemination ongoing
- 739. Printing and dissemination of health sector issues papers
Dissemination ongoing
- 740. Support for development and dissemination of PAC analytical report
Dissemination ongoing
- 740a. Reprinting, dissemination of Issues in Postabortion Care: Scaling-Up Services
Dissemination ongoing
- 741. Printing and dissemination of English Self-Assessment Guide
Dissemination ongoing
- 742. Support to develop private practitioner in child survival documents, Uganda MOH
Completed
- 743. Translating and editing Nutrition Essentials Training Modules (Mali Modules)
Completed
- 744. Using video to destigmatize HIV/AIDS in Francophone countries
Dissemination ongoing
- 745. Translation of NAP+ regional meeting report into French
Completed
- 746. Printing and dissemination of IDSR briefing packets (English and French)
Dissemination ongoing
- 747. Reprinting and dissemination of PVO compendium
Dissemination ongoing

Appendix D—CTO Letter Tracking List

- 748. Reprinting and dissemination of private practitioners paper
Dissemination ongoing
- 749. Reprinting and dissemination of issues paper on the health sector HR crisis in Africa
Dissemination ongoing
- 750. Purchase, dissemination of supplement to AJTMH, “The Intolerable Burden of Malaria”
Awaiting supplement
- 751. Two advocacy brochures on private practitioners
Cancelled - did in-house
- 752. Printing & disseminating USAID Malaria Programs in Africa
Dissemination ongoing
- 753. Printing & dissemination of TB & Gender study report
Dissemination ongoing
- 754. Production & dissemination of HIV/AIDS & nutrition brochure
Dissemination ongoing
- 755. Translation, printing & dissemination of the HIV/AIDS stigma toolkit
Translation in progress
- 756. Translation of USAID document, family planning/HIV integration: technical guidance
Activity underway
- 757. Printing, dissemination of Child Survival in Sub-Saharan Africa: Taking Stock
Activity underway
- 800. Assessing youth livelihood & enterprise development programs through IDRC
Completed
- 801. Laurence Codjia, CESAG, to Washington, discussions on health management & economic issues
Completed
- 802. Ellen Piwoz to provide TA to ZVITAMBO project
Completed

Appendix D—CTO Letter Tracking List

- 802a. TA to ZVITAMBO project through September 30, 2001
Completed
- 802b. TA to ZVITAMBO project through September 30, 2002
Completed
- 802c. TA to ZVITAMBO project through September 30, 2003
Completed
- 802d. TA to the ZVITAMBO Project through September 30, 2004
Activity underway
- 803. Increasing e-mail and Internet access for nutrition focal points
Completed
- 804. Assessment of WHO/AFRO outcome/impact indicators & malaria-related evaluations & assessments
Completed
- 805. Purchase of LCD Projector
Completed
- 806. Development of database for AFR/SD
Completed
- 806a. Extension of SOFTEK subcontract for database and added funding
Completed
- 807. Issues paper on public health workforce crisis in Africa
Dissemination ongoing
- 808. Integration of AIDS & development training in IMPACT workplace initiative
Completed
- 809. Finalization of TBA meta analysis, participation at USAID brainstorming meeting
Completed
- 810. Life skills lessons learned, non-formal HIV education evaluations
Completed
- 811. Annual AED/IT database fee for CY 2002
Completed

Appendix D—CTO Letter Tracking List

- 812. Qualitative research on perceived changes in quality, level of FP & RH services in HIV countries
Completed
- 813. Donor mapping in WARP area
Completed
- 813a. Donor mapping in WARP area; additional consultant days and travel
Completed
- 814. Study tour on model programs that work with men, domestic violence, and HIV prevention
Completed
- 815. Financing and health systems expert to join Angola EPI review
Completed
- 816. WHO participation in IMCI IAWG meeting, Washington, DC
Completed
- 817. Use of CTC to support HIV-infected individuals, households, and communities
Activity underway
- 817a. Use of CTC to support HIV-infected individuals, households, communities - additional costs
Activity underway
- 818. Strengthening African nonprofit sector in reproductive health
Activity underway
- 819. SARA support to West Africa PAC Initiative: CEFOREP Secretariat costs
Activity underway
- 820. Impact of morbidity & mortality due to HIV/AIDS on the cocoa industry in Ghana
Subcontract with BU pending
- 821. Travel of South African panelist to “Women’s Voices Women’s Choices” Conference, March 04
Completed
- 822. Review of Understanding & Challenging HIV Stigma Toolkit for possible Francophone use
Cancelled

823. Secondary data & lab analysis projects from ZVITAMBO study for
pediatric AIDS programs
Subcontract with ZVITAMBO pending